

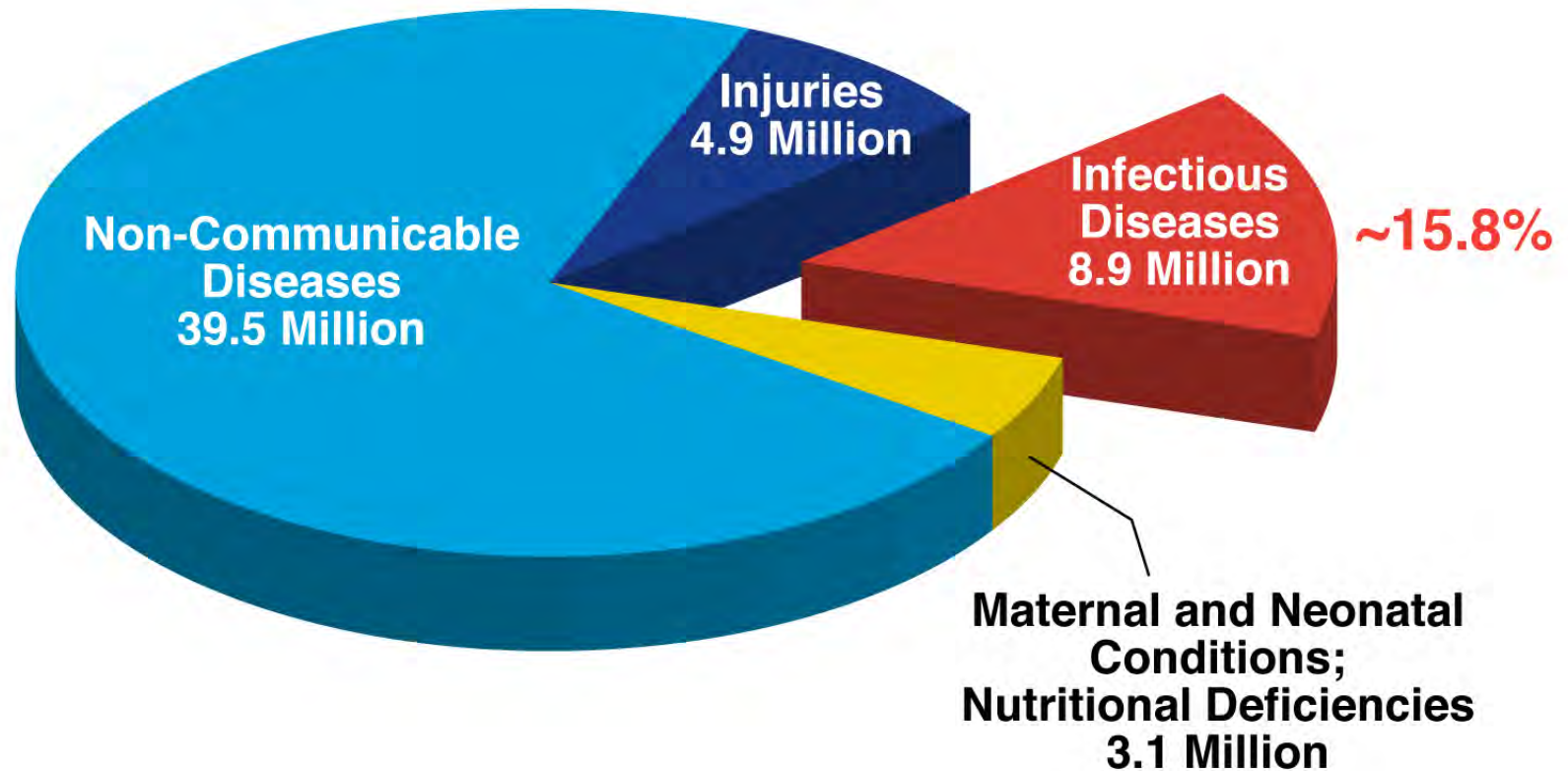
DEMYSTIFYING MEDICINE

INFECTIOUS DISEASE CHALLENGES IN 2017


16 May 2017

Presented at the U. S. National Institutes of Health
by David M. Morens, NIAID, NIH

Infectious Diseases Caused ~16% of All Deaths Worldwide in 2015



Estimated Total Deaths (2015): 56.4 Million

A black and white photograph of a person in a dark cape standing in a doorway, with a body lying on the ground in the foreground.

Every 30 seconds
infectious diseases
kill as many people as
Jack the Ripper killed
in his entire career

Global Health and Infectious Diseases

■ **Established Infectious Diseases**

■ **Newly Emerging Diseases**

■ **Re-Emerging Diseases**

Examples of Established Infectious Diseases of Global Health Importance

	Estimated Deaths, 2015
Lower Respiratory Infections	3.2 M
Tuberculosis	1.4 M
Diarrheal Diseases	1.4 M
Hepatitis B & C	1.3 M
HIV/AIDS	1.1 M
Malaria	429,000
Meningitis	315,000

The Global Burden of Malaria, 2015

- **429,000 malaria deaths, 92% in Africa**
- **212 million new malaria cases**
- **Ongoing transmission in 91 countries/areas**
- **Every two minutes a child <5 years dies from malaria**



Progress in Fighting Malaria, 2000-2015

- **Scale-up of key interventions**
 - Insecticide-treated mosquito nets
 - Indoor residual spraying
 - Rapid diagnostic testing
 - Artemisinin-based combination therapy (ACT)
 - Intermittent preventive treatment in pregnancy
- **41% decline in incidence rate**
- **60% decline in malaria deaths**
- **6.8 million lives saved**
- **17 countries eliminated malaria**



Scientific / Clinical Development of PfSPZ Vaccine

Scientific
Advance

VRC 312 -
Clinical Study

VRC 314 -
Clinical Study

Field

2011

2013

2015

2017



**Live Attenuated
Malaria Vaccine
Designed to Protect
Through Hepatic CD8+
T cell Immunity**

JE Epstein, SL Hoffman et al.

Scientific Discovery

IV immunization
induces CD8 T cells in
liver of NHP



**Protection Against
Malaria by
Intravenous
Immunization with a
Nonreplicating
Sporozoite Vaccine**

RA Seder, SL Hoffman et al.

Proof of Principle

Short-term protection
(>80%) IV Immunization



**Protection Against
Malaria at 1 Year and
Immune Correlates
Following PfSPZ
Vaccination**

AS Ishizuka, H DeCederfelt et al.

Durability

– Protection (60%) 1 year
– Immune correlates of
protection



**Attenuated PfSPZ Vaccine
Induces
Strain-transcending T Cells
and Durable Protection
Against Heterologous
Controlled Human Malaria
Infection**

K Lyle, RA Seder et al.

Heterologous

Protection (55%) 8
months

Field Study

Double-blind, randomized, placebo-controlled
phase II efficacy trial in healthy infants 5–12
months of age in Kenya

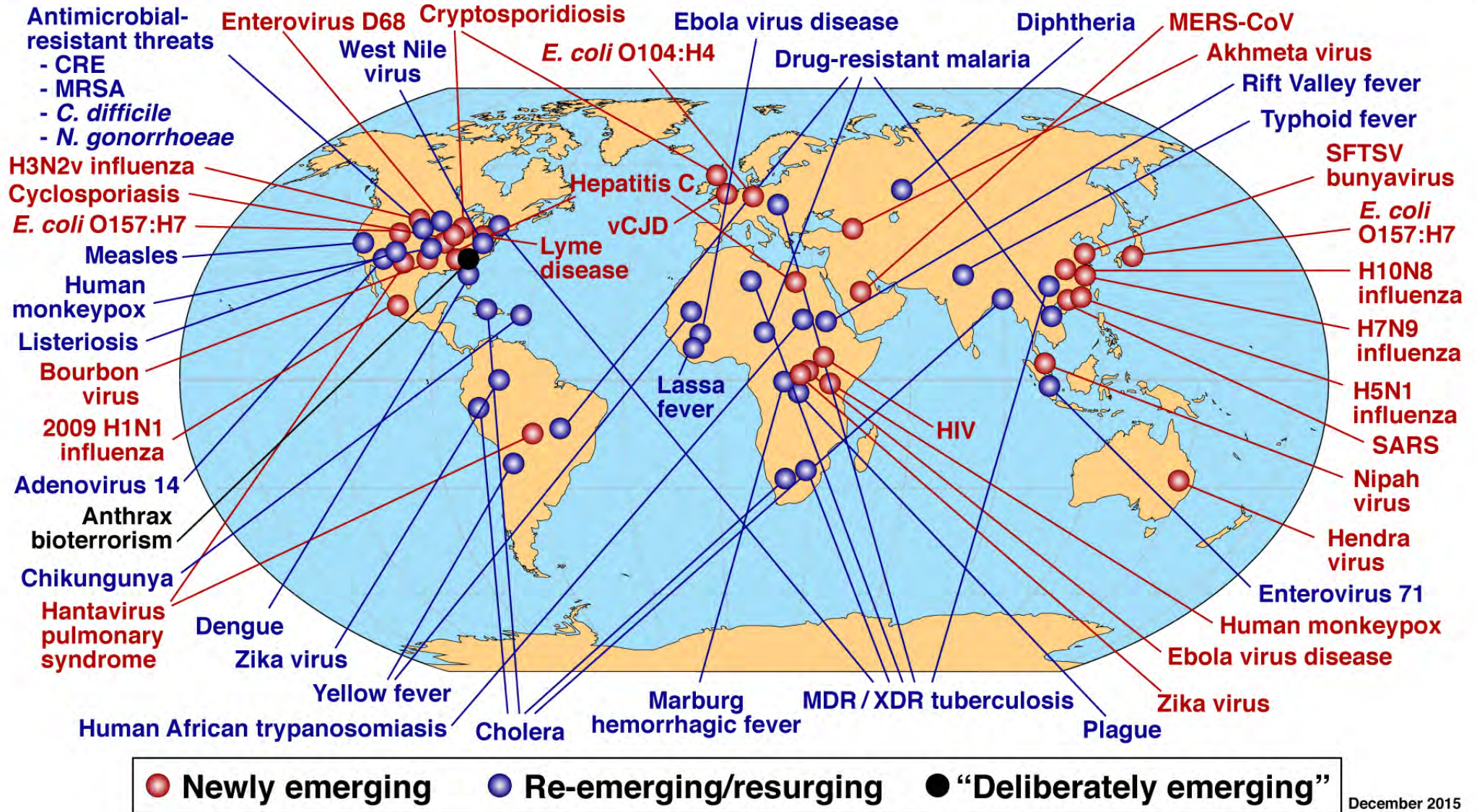
Global Health and Infectious Diseases

■ **Established Infectious Diseases**

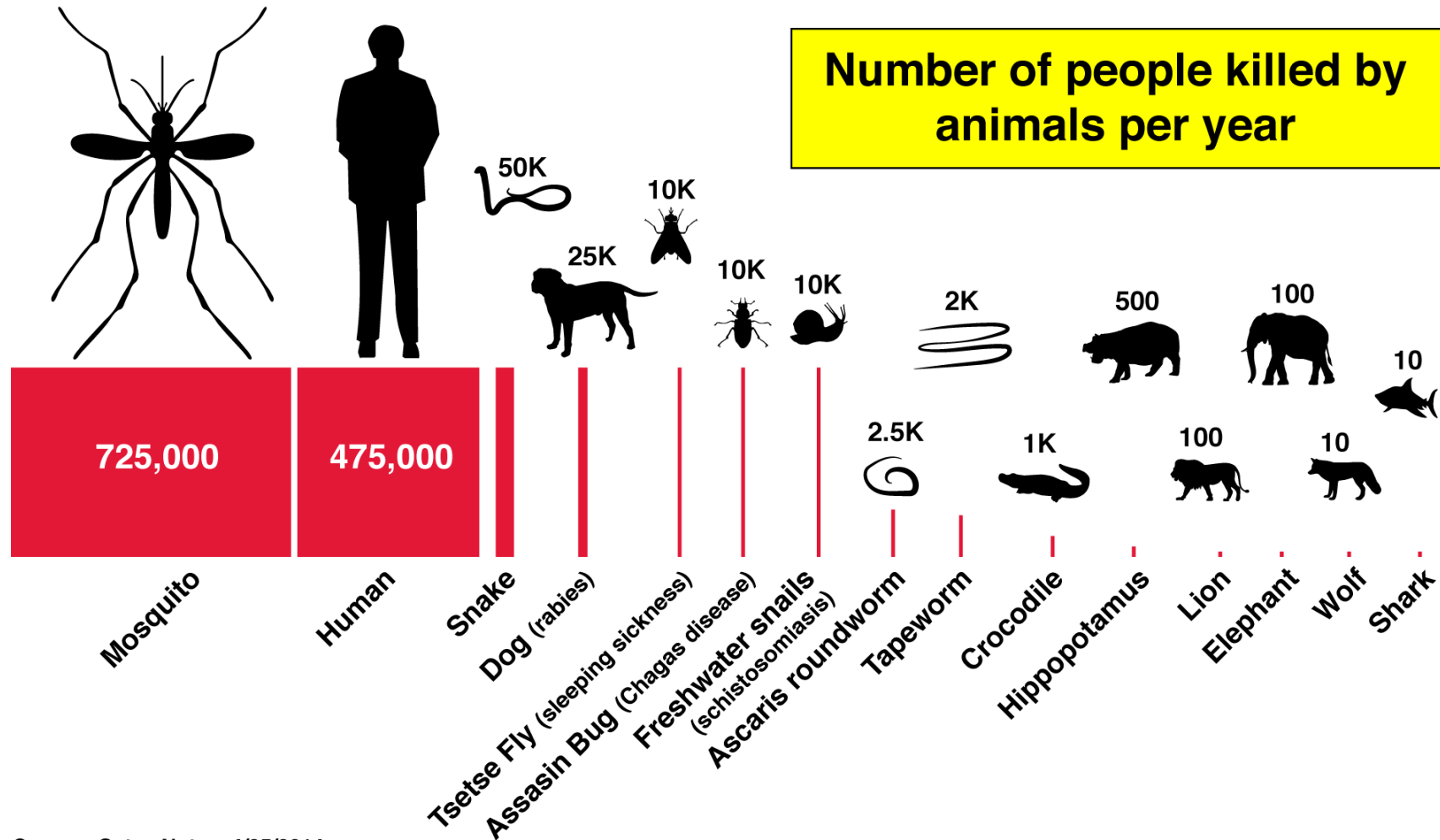
■ **Newly Emerging Diseases**

■ **Re-Emerging Diseases**

Global Examples of Emerging and Re-Emerging Infectious Diseases



World's Deadliest Animals



Source: Gates Notes, 4/25/2014

DETERMINANTS OF DISEASE EMERGENCE

- 1 – **Microbial** adaptation & change
- 2 – Human **susceptibility** to infection
- 3 – **Climate** and weather
- 4 – Changing **ecosystems**
- 5 – Human **demographics**/behavior
- 6 – Economic **development**/land use
- 7 – International **trade**/commerce
- 8 – **Technology** and industry
- 9 – Breakdown of **RH** measures
- 10 – **Poverty** and social inequality
- 11 – **War** and famine
- 12 – Lack of **political will**
- 13 – **Intent to harm**



Recently Emerging Human Arboviral Diseases in the Americas

Dengue 1990s

West Nile 1999

Chikungunya 2013

Zika 2015

Yellow Fever 2016

**Others: Bourbon, Cache Valley,
Heartland, Itaquí, Mayaro, Oropouche,
Powassan**

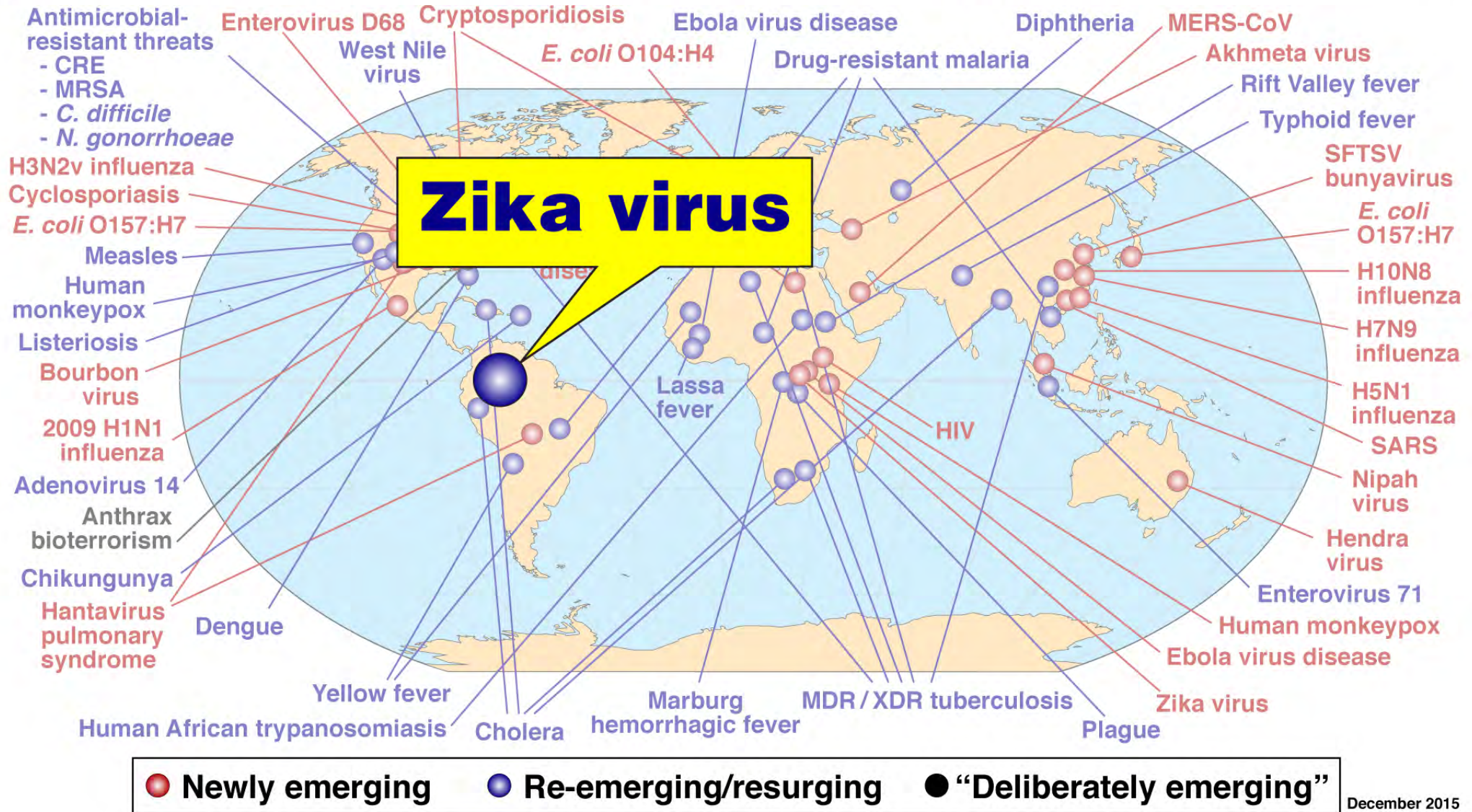


Emergent and Reemergent Arboviruses in South America and the Caribbean: Why So Many and Why Now?

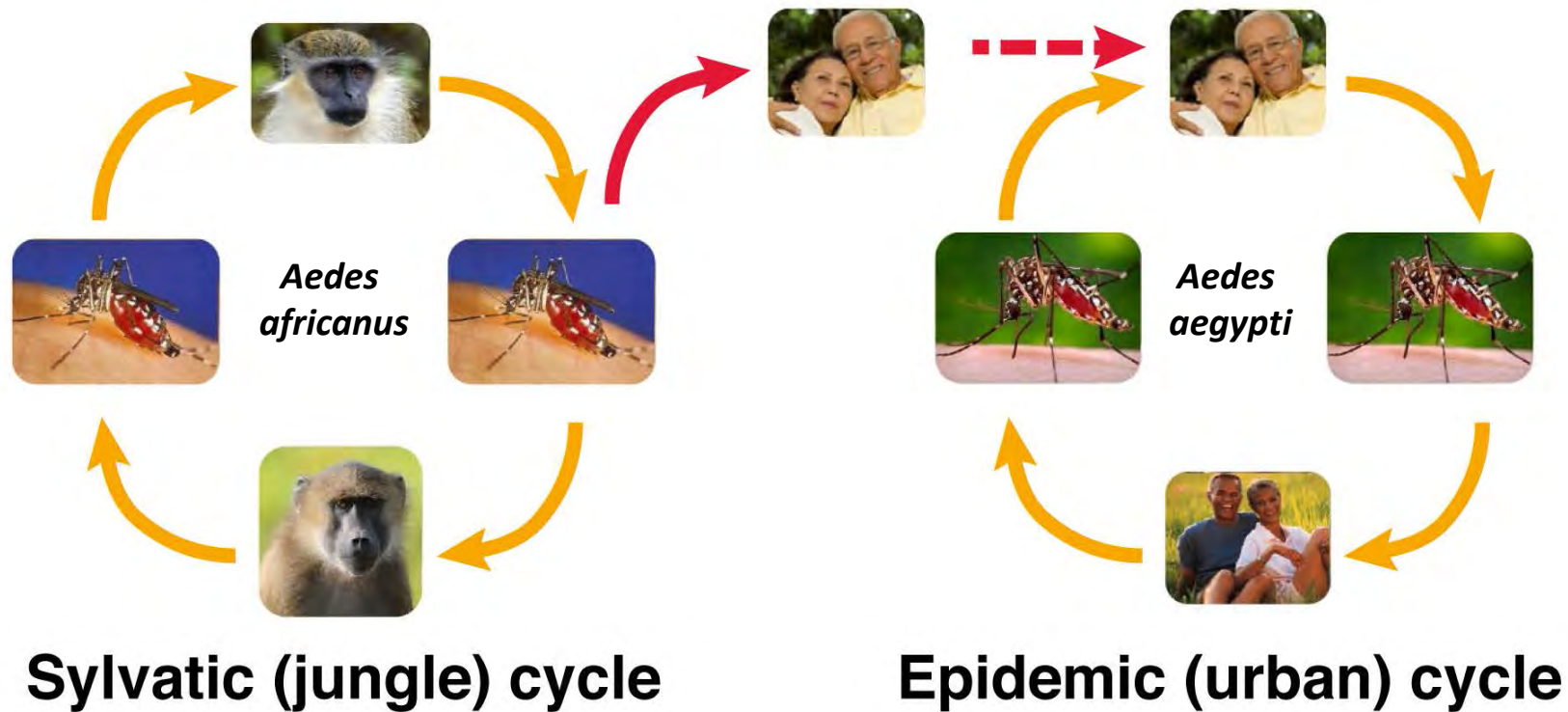
CB Marcondes et al.

- **Availability of vectors and hosts (e.g. >860 mosquito species in S. America)**
- **Changing climate and vegetation**
- **Increased international travel and commerce**
- **Urbanization**

Global Examples of Emerging and Re-Emerging Infectious Diseases



Zika Virus Transmission Cycles

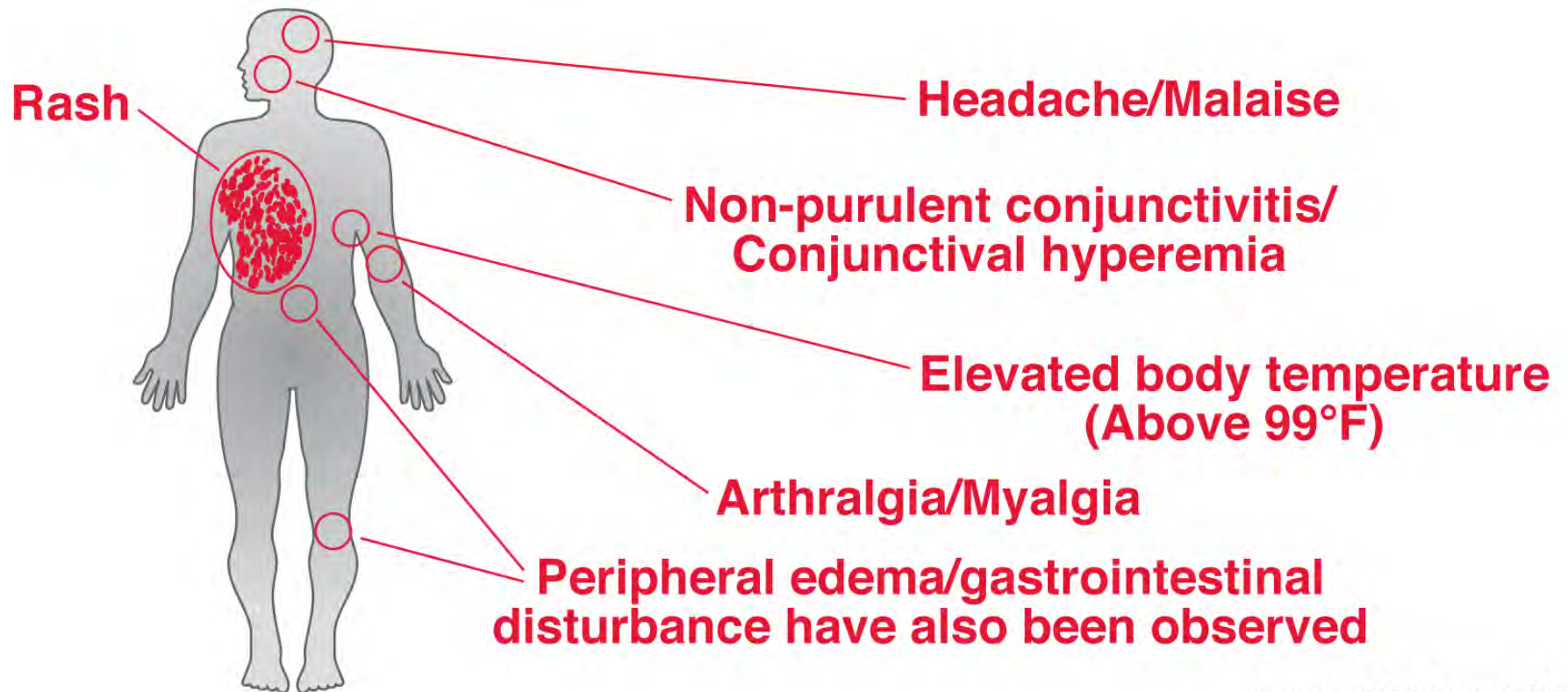


Symptoms of Zika Virus Infection

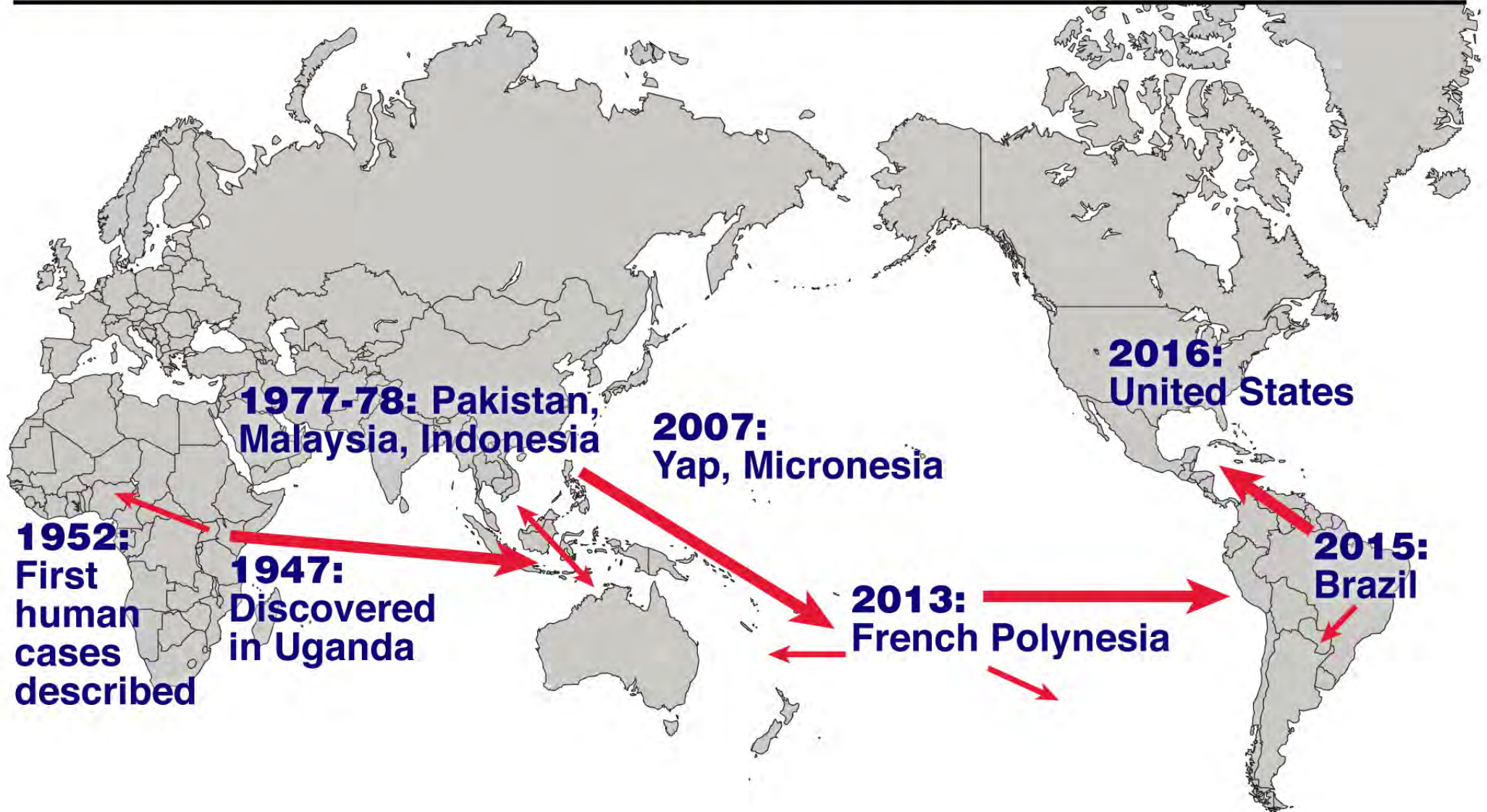
■ 4 in 5 individuals *asymptomatic*

Incubation
3-12 days

Mild symptoms
2-7 days

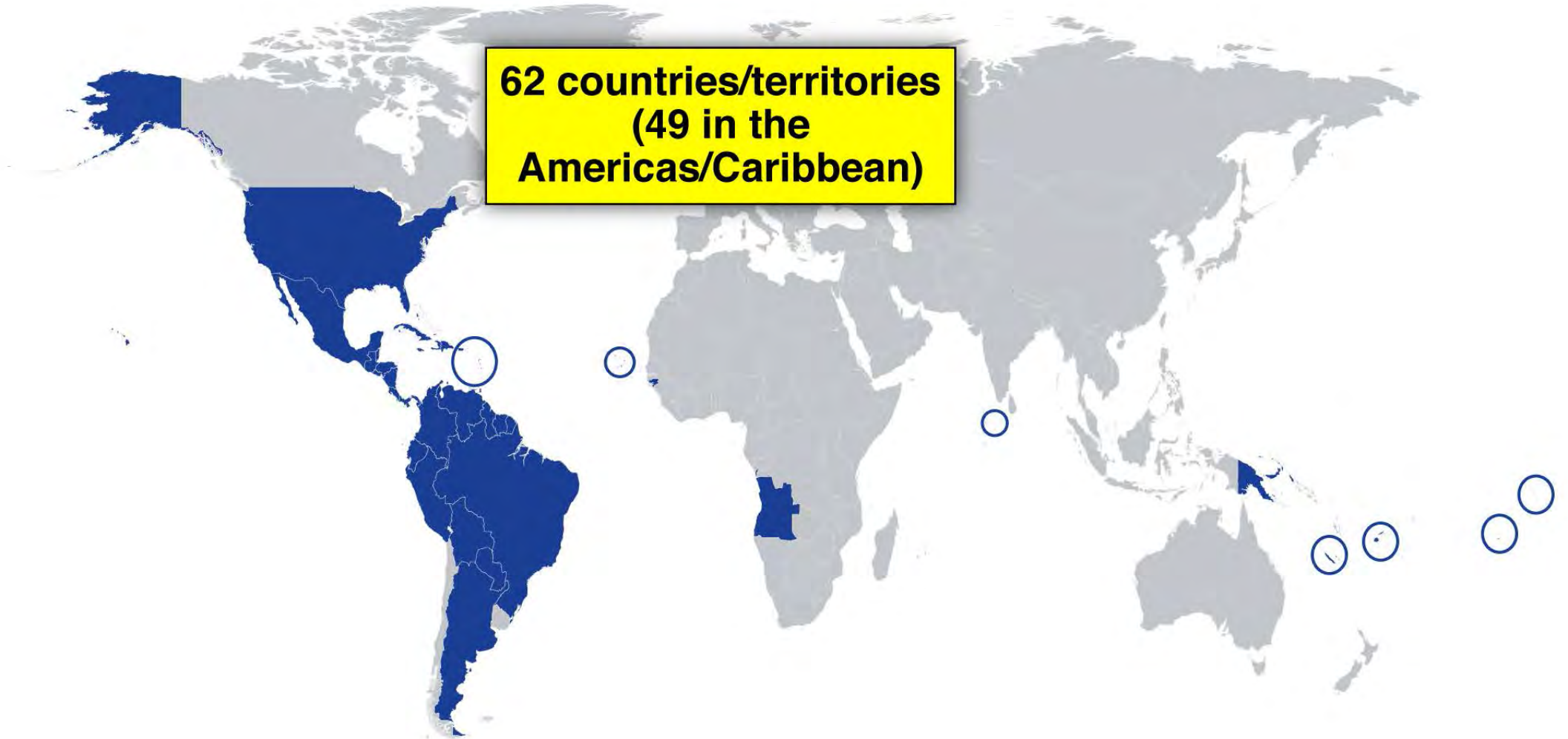


Zika Virus Spread, 1947-2017

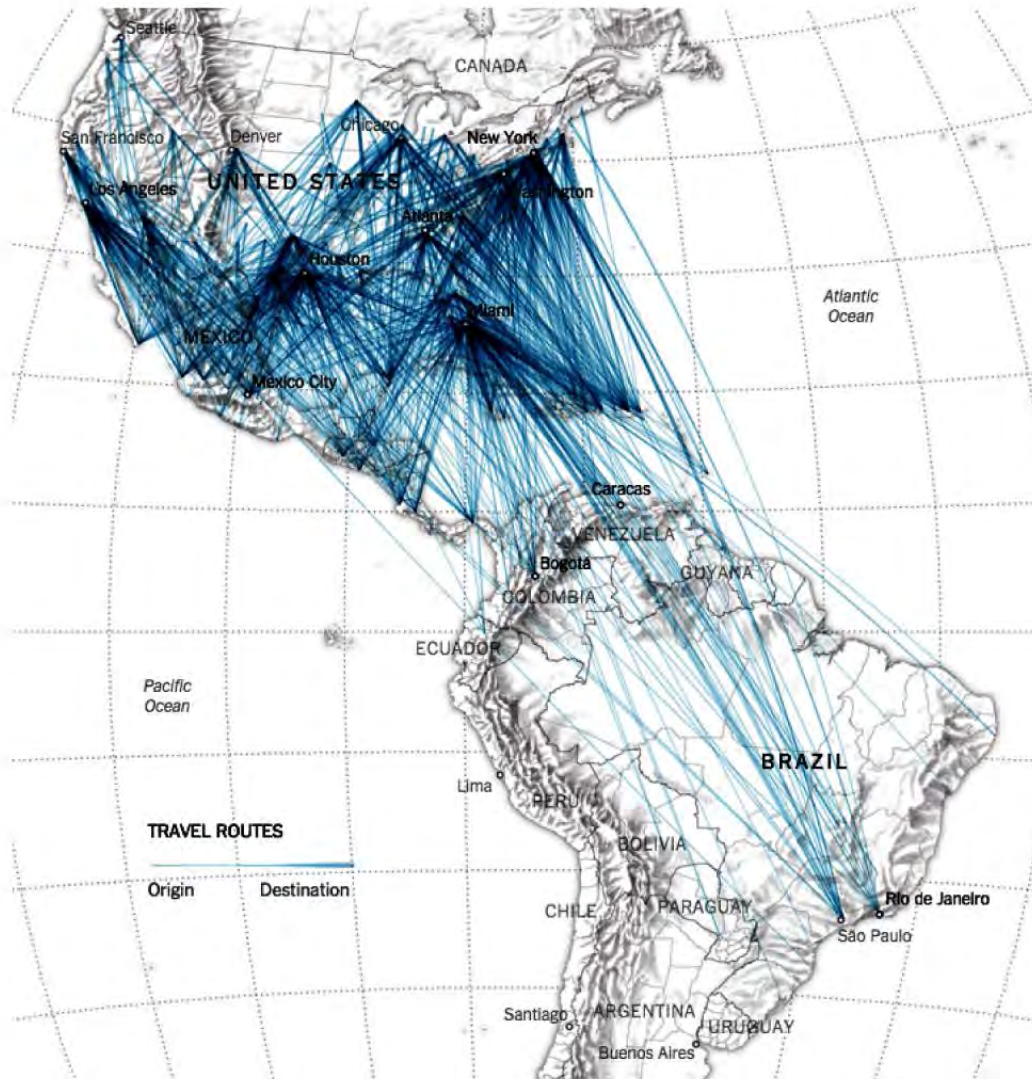


Countries and Territories with Recent Local Zika Virus Transmission - May 2017

**62 countries/territories
(49 in the
Americas/Caribbean)**



Potential for Imported Cases of Zika in the United States

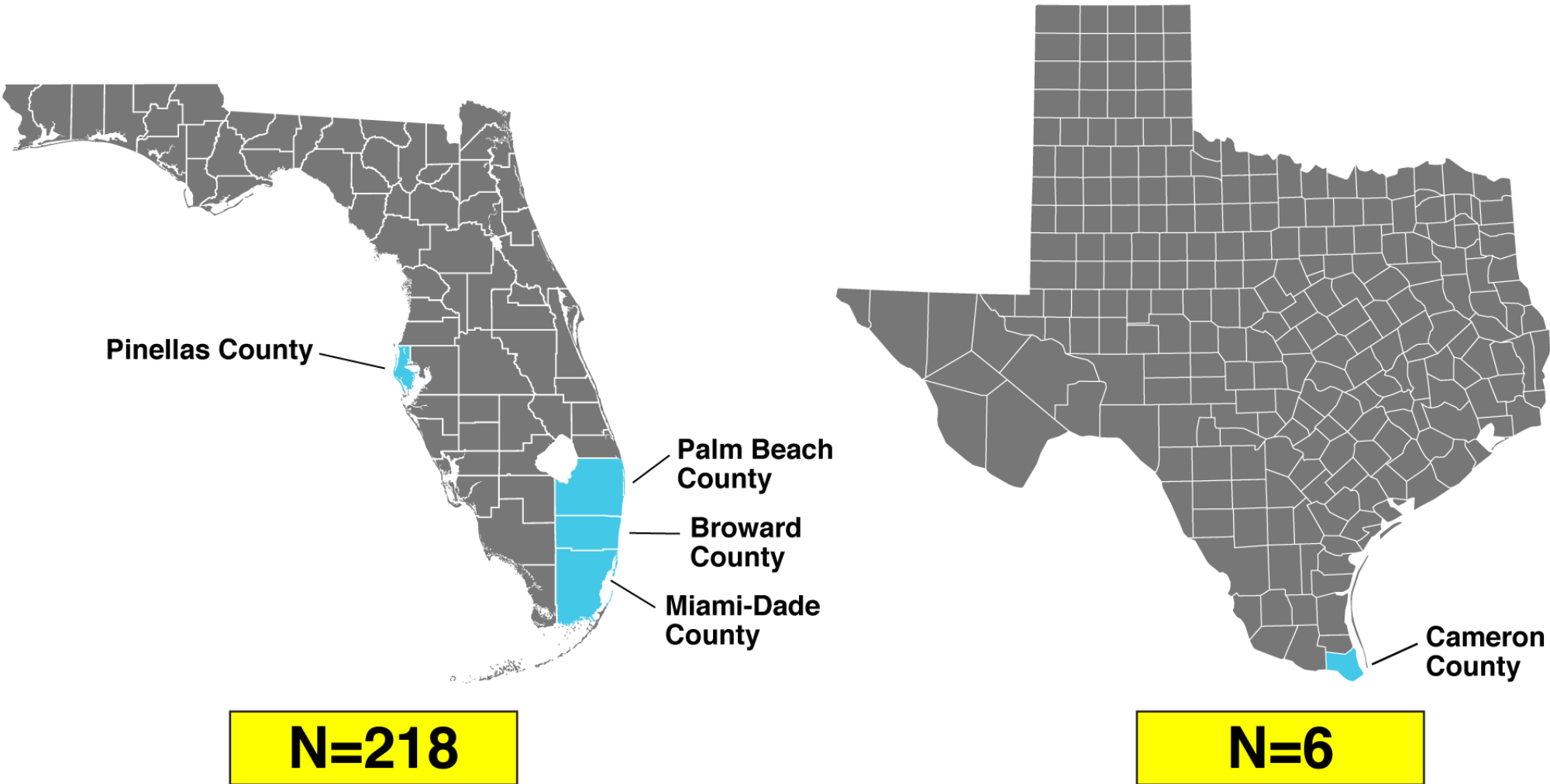


■ ~216 million passenger journeys to U.S. annually from areas with local Zika virus transmission

- 34 M by air
- 173 M by land
- 9 M by sea

Sources: B Nelson et al. *PLoS Currents Outbreaks*, 5/31/2016; NY Times.

Locally Acquired Mosquito-Borne Zika Infections in Florida and Texas, 2016-2017



Source: CDC, data as of May 3, 2017

Reported Cases of Zika Virus Disease in the United States, 2015–2017

■ U.S. States / District of Columbia

– 5,273 cases

- 5,001 travel-associated
- 224 locally acquired mosquito-borne
- 46 sexually transmitted, 29 congenital
- 1 laboratory-acquired, 1 unknown

■ U.S. Territories

– 36,581 cases

- 36,438 locally acquired
- 143 travel-associated

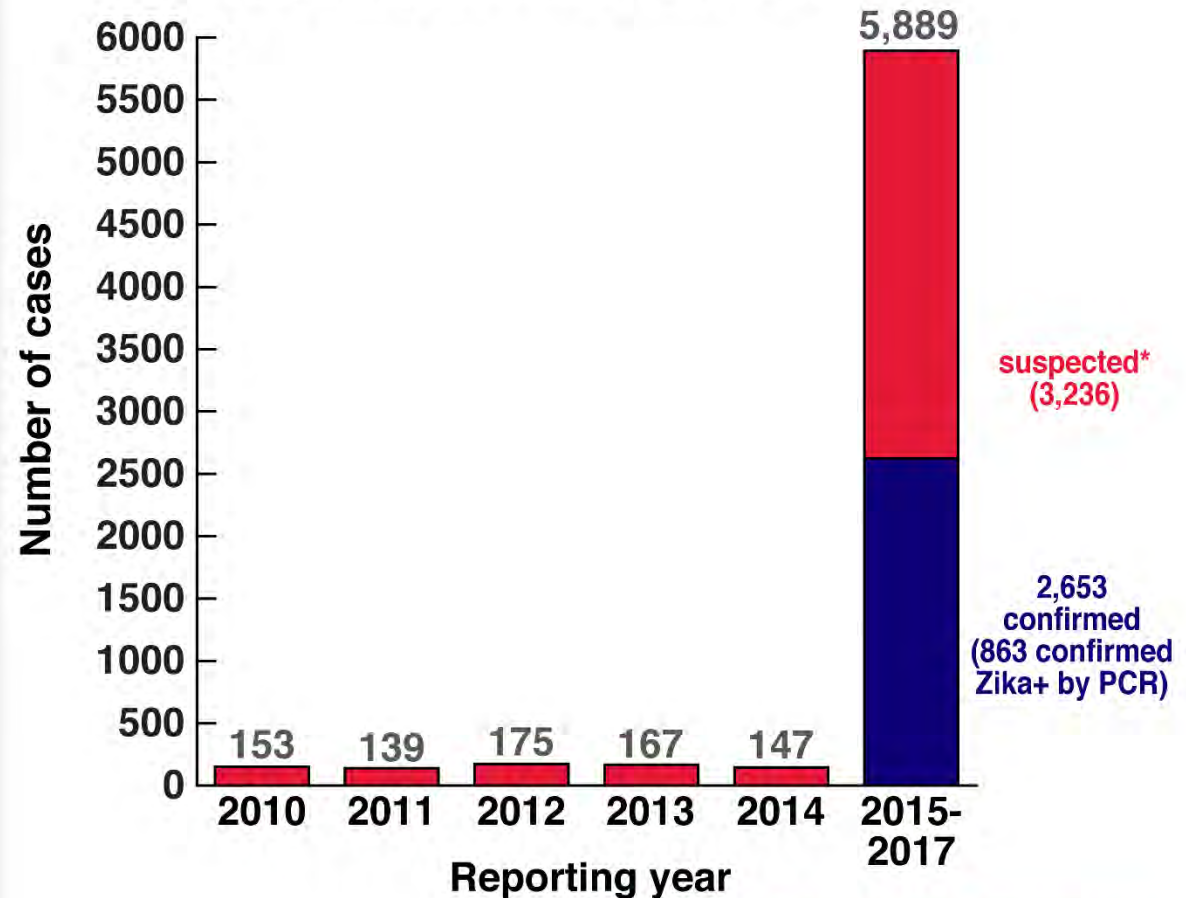
Marked Increase in Microcephaly Cases in Brazil

Associated Press

November 30, 2015

Brazil Links Mosquito-Borne Zika Virus to Microcephaly Birth Defect

Microcephaly cases in Brazil 2010-14;
suspected/confirmed cases 2015-2017



*does not include cases investigated and discarded

Source: Brazilian MOH; data as of April 26, 2017

Published online
November 03, 2016

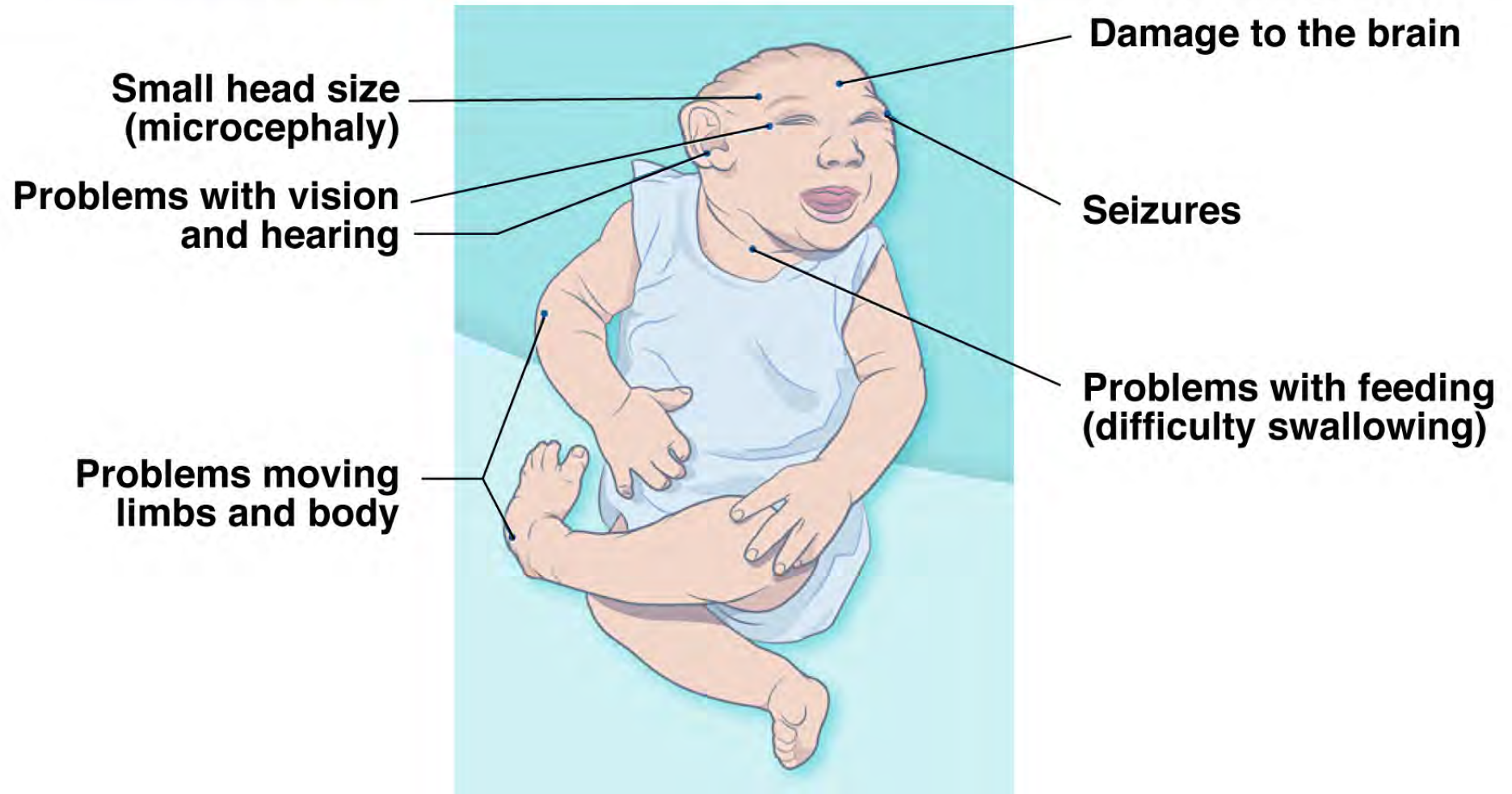
JAMA Pediatrics

Characterizing the Pattern of Anomalies in Congenital Zika Syndrome for Pediatric Clinicians

CA Moore, SA Rasmussen et al.

“Congenital Zika syndrome is a recognizable pattern of structural anomalies and functional disabilities secondary to central and, perhaps, peripheral nervous system damage.”

Congenital Zika Syndrome is a Pattern of Birth Defects in Babies Infected with Zika During Pregnancy



Zika-Affected Pregnancies and Outcomes in the United States, 2015-2017

■ U.S. States / District of Columbia

– 1,793 pregnancies

- 1,409 completed pregnancies with or without birth defects
- 58 liveborn infants with birth defects
- 8 pregnancy losses with birth defects

■ U.S. Territories

– 3,700 pregnancies*

*CDC is not reporting numbers for adverse pregnancy outcomes in the territories at this time

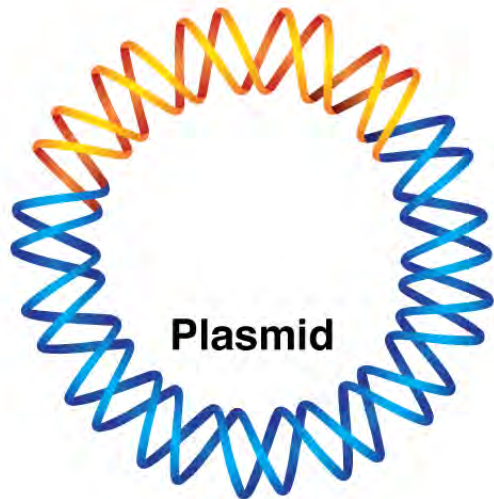
Source: CDC, data as of April 25, 2017

Reported Complications of Zika Virus Disease in Adults

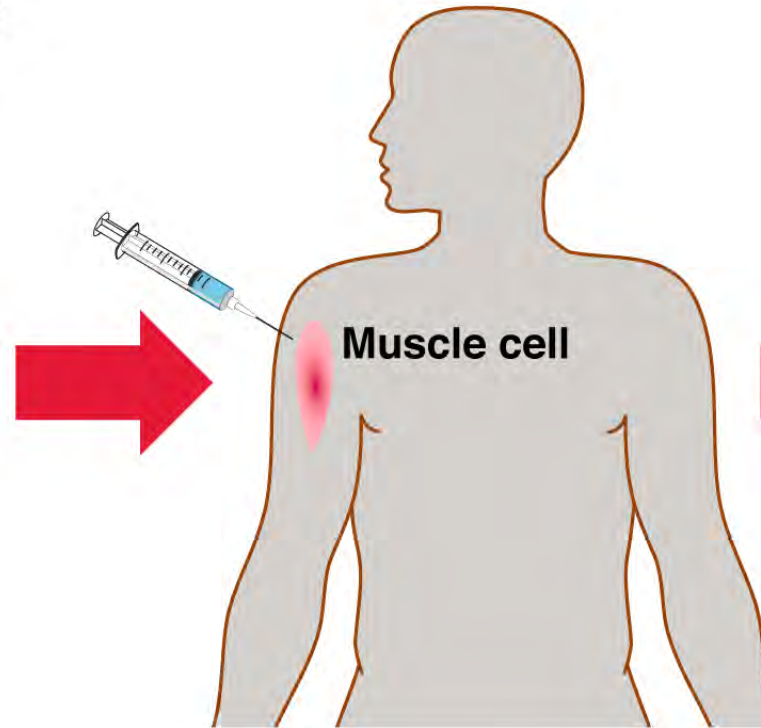
- **Guillain-Barré syndrome**
- **Myelitis**
- **Meningoencephalitis/encephalomyelitis**
- **Uveitis**
- **Hearing impairment**
- **Thrombocytopenia**
- **Heart disease**

DNA Vaccine Approach

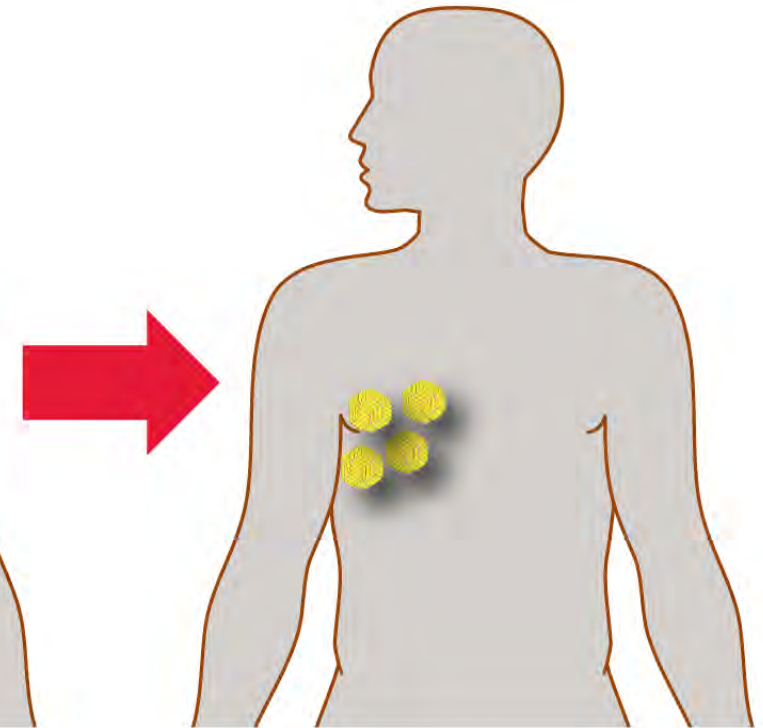
Gene encoding
surface protein
from Zika virus



Inject DNA
containing
Zika gene



Body's cells
produce virus-like
particles, the basis
of the vaccine



News Release

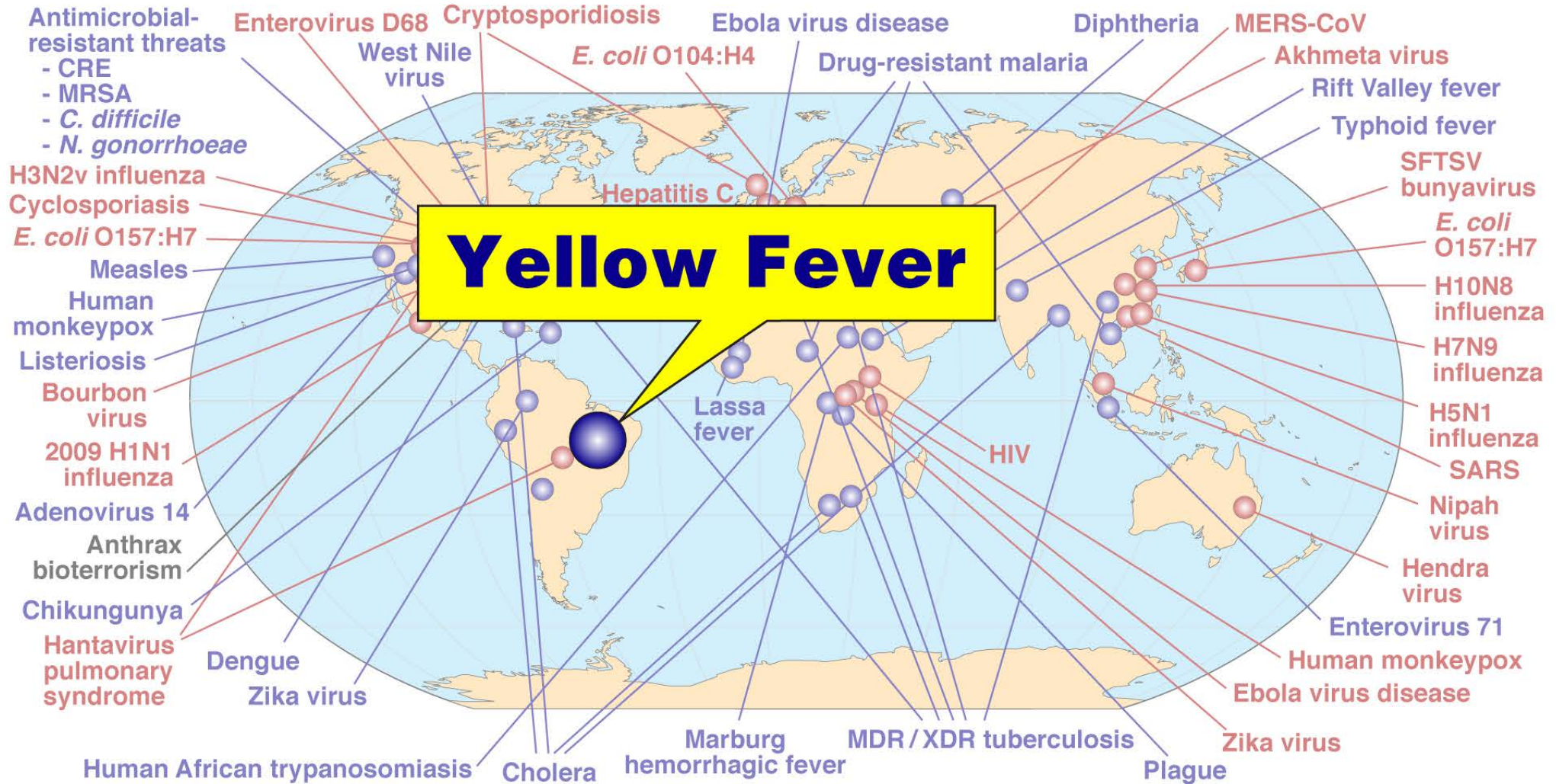
Phase 2 Zika Vaccine Trial Begins in U.S. and Central and South America

Study Will Evaluate NIH's Experimental DNA Vaccine

- **Enrollment target: at least 2,490 individuals in the continental United States, Puerto Rico, Brazil, Peru, Costa Rica, Panama and Mexico**



Global Examples of Emerging and Re-Emerging Infectious Diseases



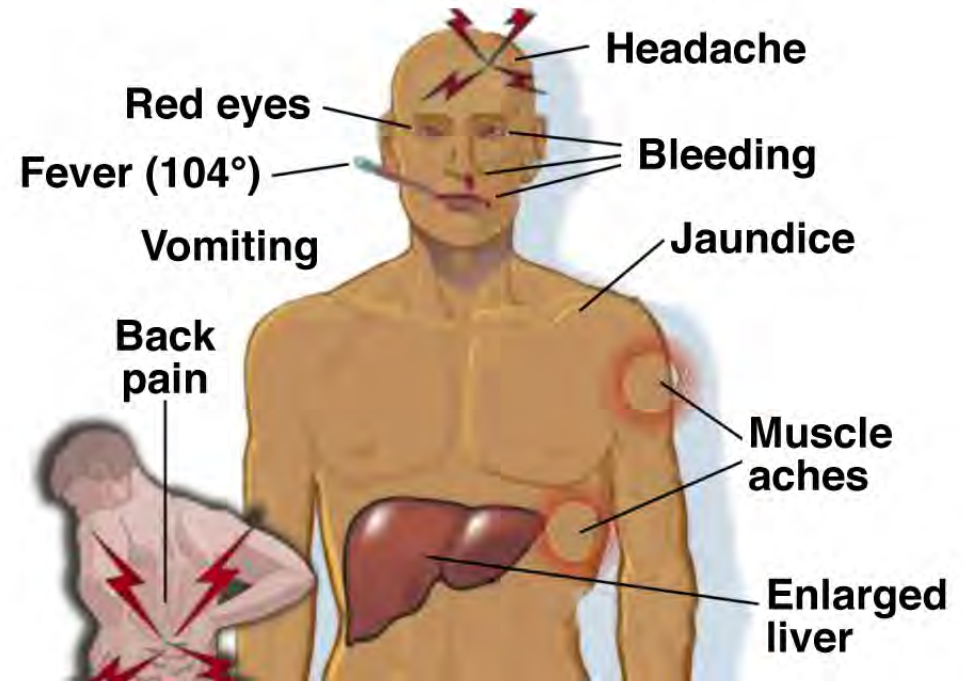
● Newly emerging ● Re-emerging/resurging ● “Deliberately emerging”

Clinical Manifestations of Yellow Fever (The original hemorrhagic fever)

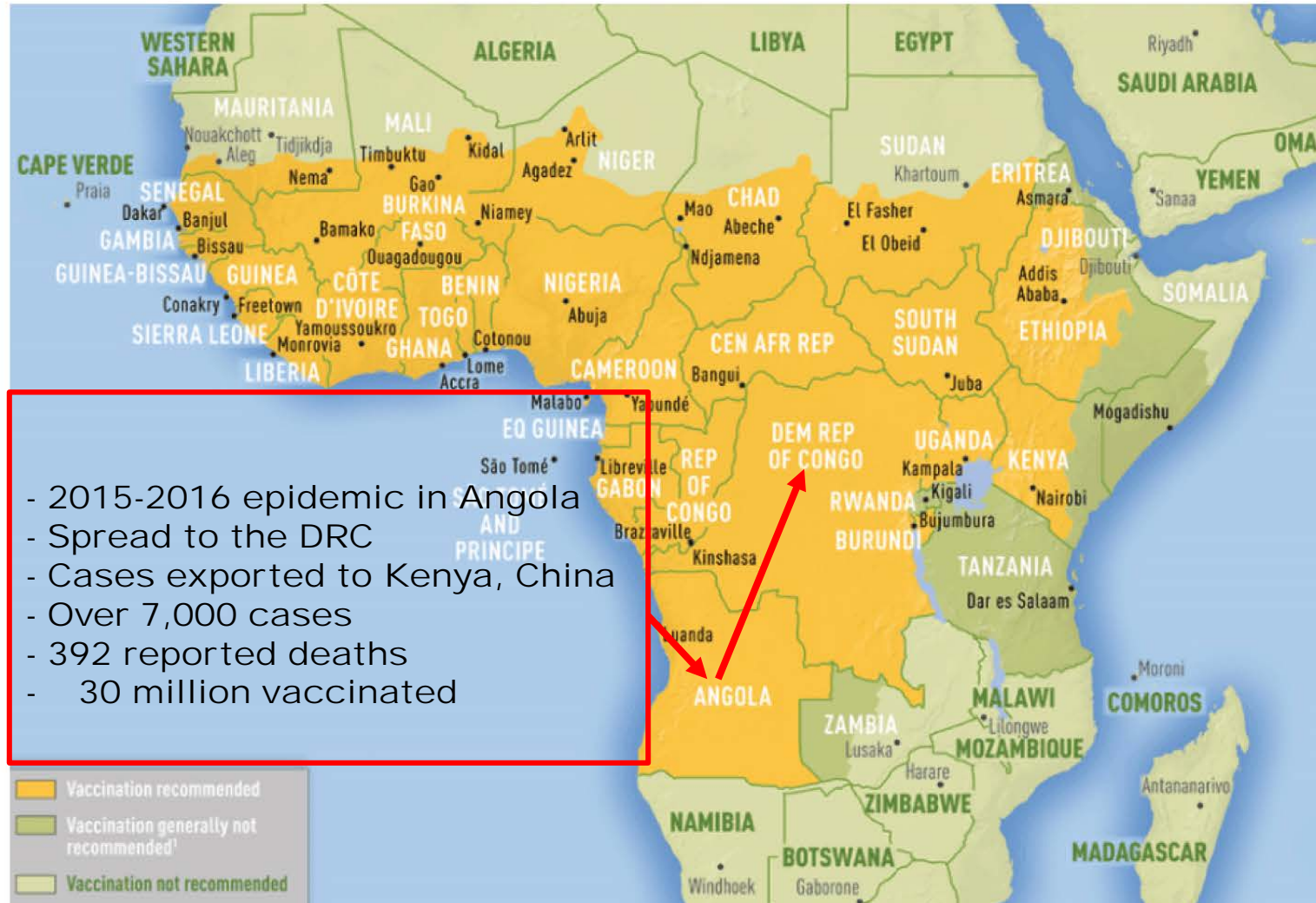
■ Incubation period: 3-6 days

■ Three clinical stages:

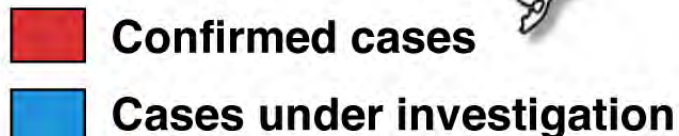
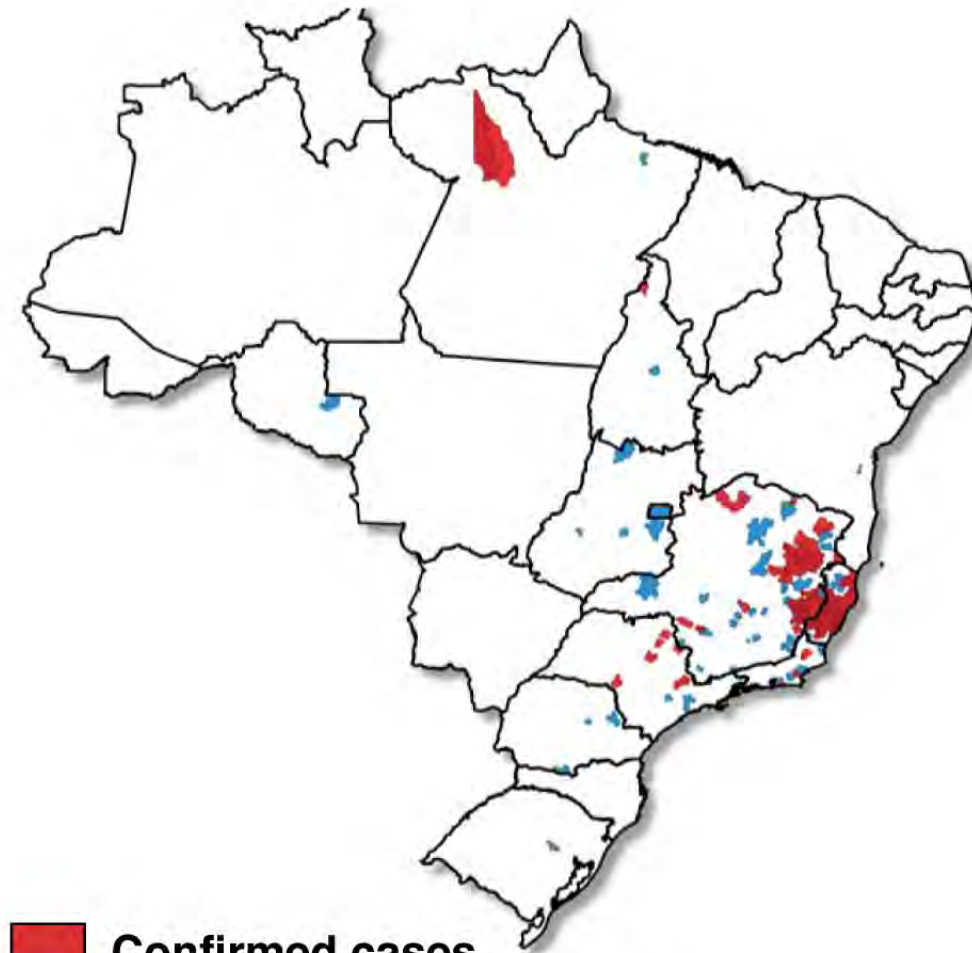
- Period of infection
- Period of remission
- Period of intoxication
 - 20-60% mortality rate



Areas at Risk for Yellow Fever Transmission: Africa



Yellow Fever in Brazil, December 2016 to May 11, 2017



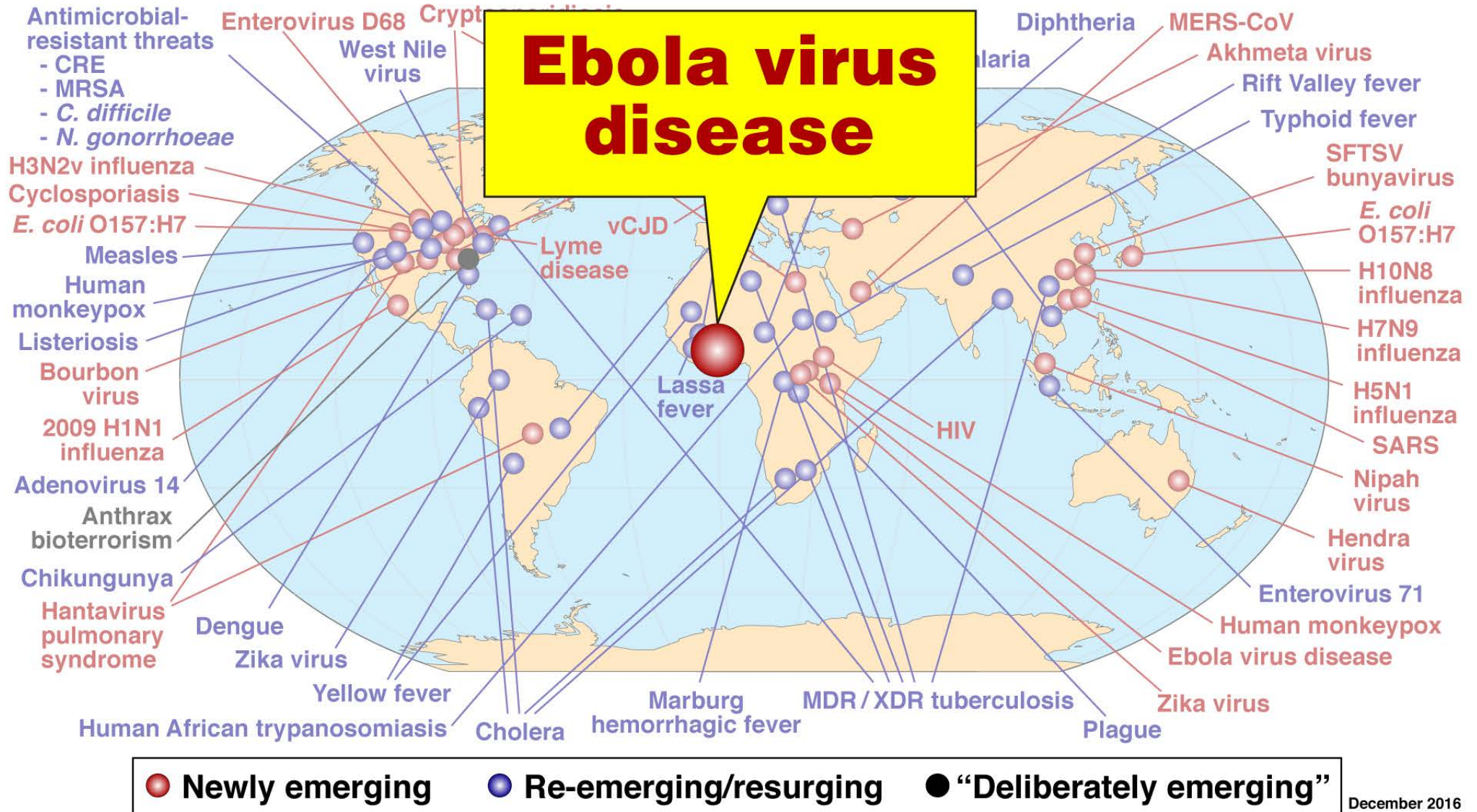
- 756 confirmed cases, 622 under investigation
- 259 confirmed deaths, 47 under investigation
- Case-fatality rate for confirmed cases: 34%

Yellow Fever Outbreak Control: Vaccination

- **Current vaccine supply:**
 - Six worldwide manufacturers
 - Worldwide stockpile of six million doses*
 - One manufacturer in the United States
- **Improving vaccine supply in an outbreak setting:**
 - Increase manufacturing capacity
 - Increase number of stockpiled doses
 - Fractional dosing
 - New vaccines

*30 million doses were used
in the Angola/DRC epidemic

Global Examples of Emerging and Re-Emerging Infectious Diseases



Reported Ebola Virus Disease Cases in Guinea, Liberia, and Sierra Leone, 2014-2016

Guinea
3,814 cases / 2,544 deaths

Sierra Leone
14,124 cases / 3,956 deaths

Liberia
10,678 cases / 4,810 deaths



Total*:
28,616 cases
11,310 deaths

40% mortality

*Confirmed, probable and suspected cases

Source: WHO, 12/2016













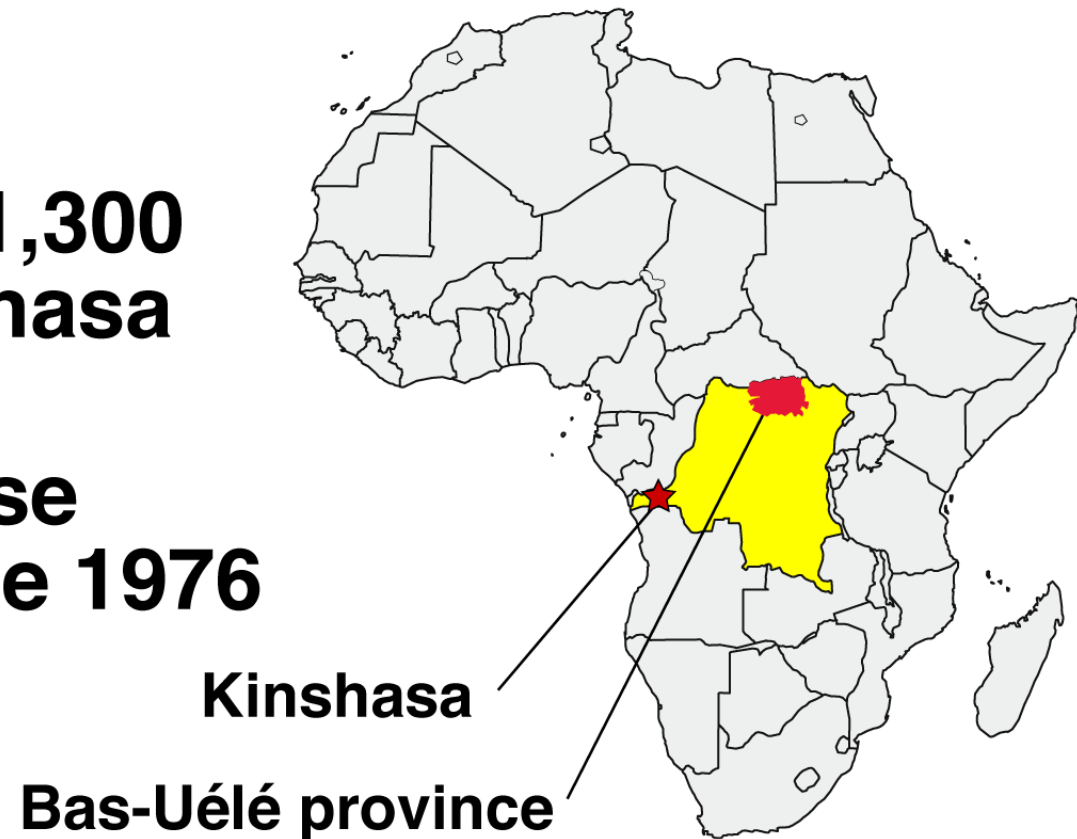
- **PREVAIL (Partnership for Research on Ebola Virus in Liberia) – collaboration between Liberian MOH and U.S. HHS**
- **Ebola studies**
 - **PREVAIL I: Phase 2 placebo-controlled vaccine trial**
 - **PREVAIL II: SOC vs SOC + ZMapp treatment trial**
 - **PREVAIL III: Natural history of survivors**
 - **PREVAIL IV: GS-5734 for persistent virus in semen**
 - **PREVAIL V: Phase 2 RCT of Ad26.ZEBOV/MVA-BN-Filo and rVSVΔG-ZEBOV-GP**

New Ebola Outbreak in Democratic Republic of the Congo (DRC), April-May 2017

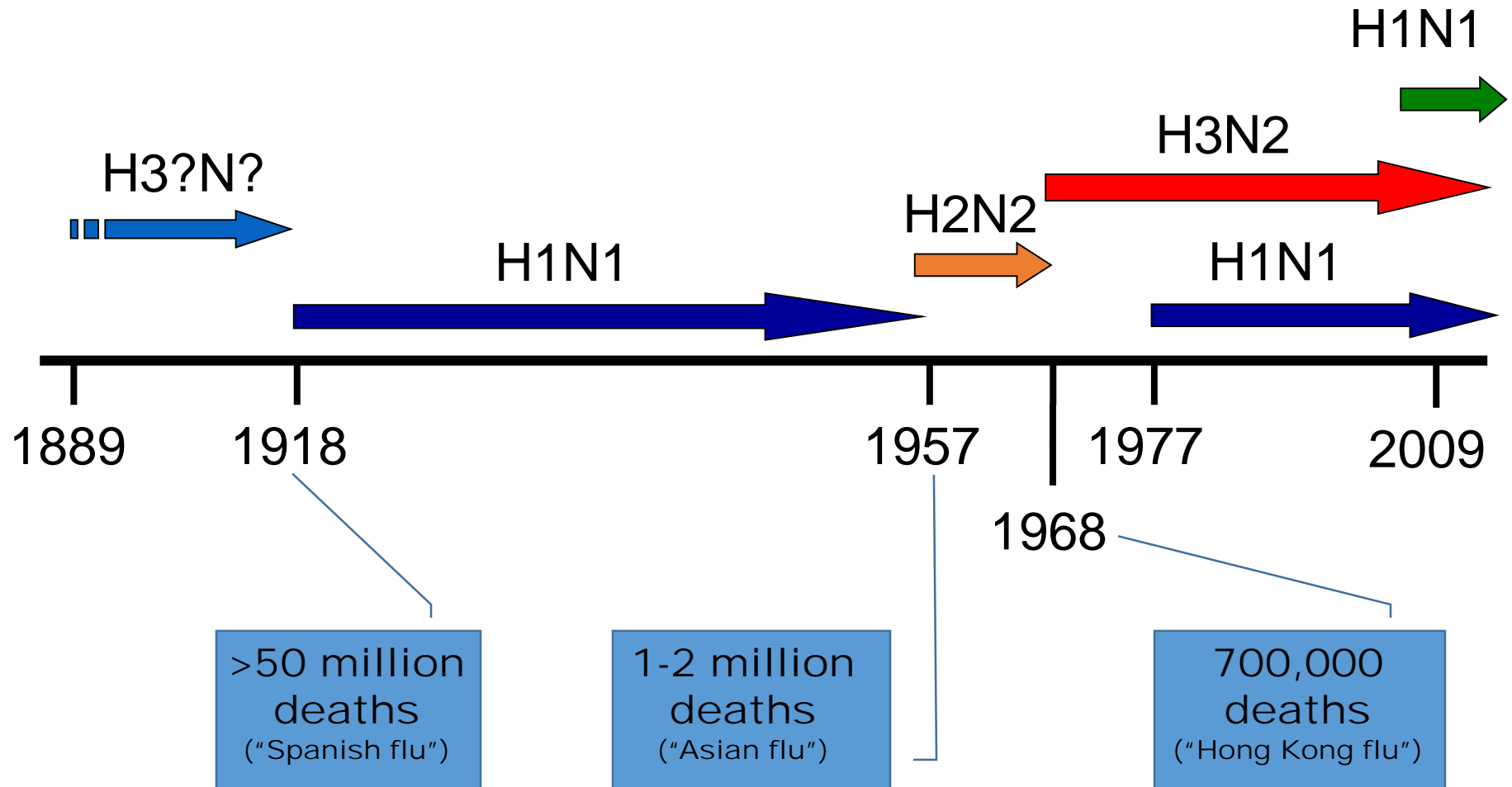
■ **19 suspected cases, 3 deaths
(as of 5/15/2017)**

■ **Bas-Uélé province, >1,300
kilometers from Kinshasa**

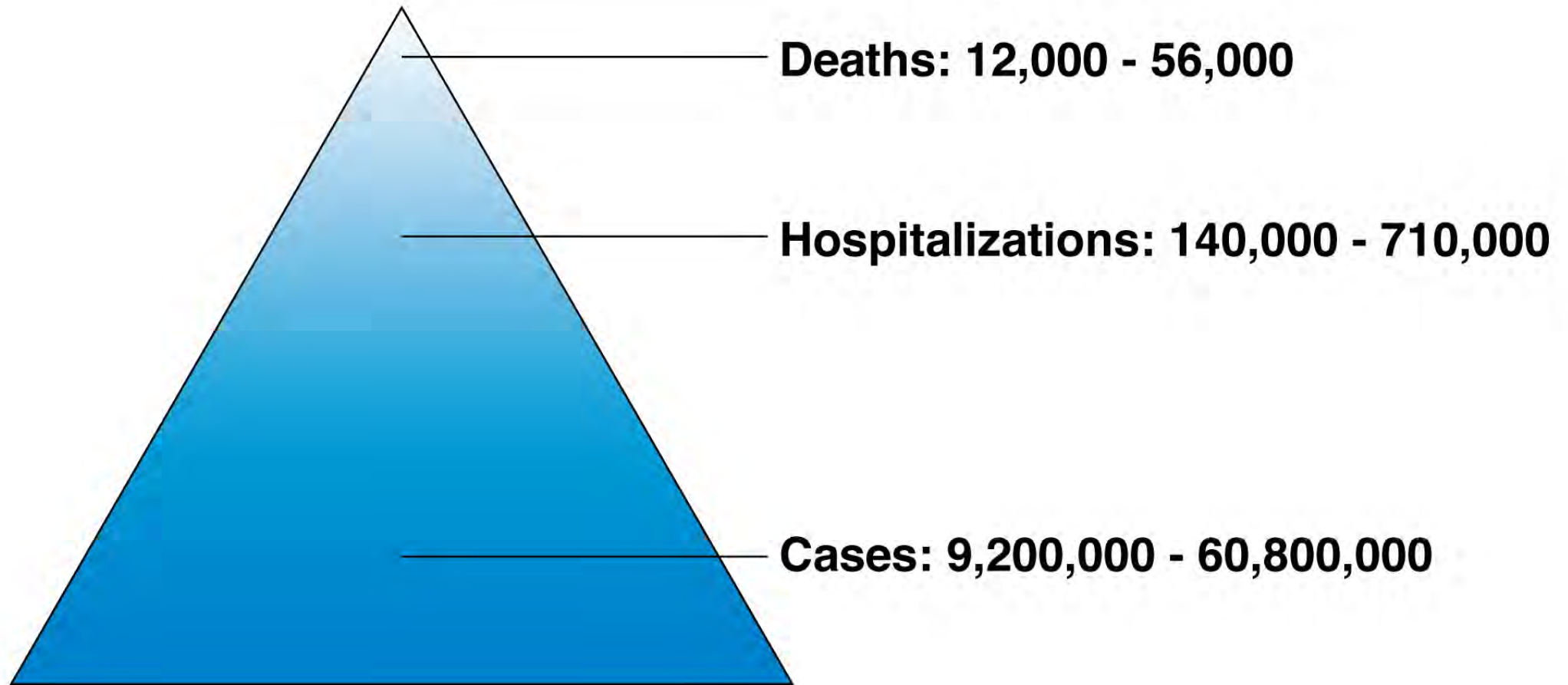
■ **8th Ebola virus disease
epidemic in DRC since 1976**



INFLUENZA IN THE 20TH CENTURY



Annual Disease Burden of Influenza in the United States



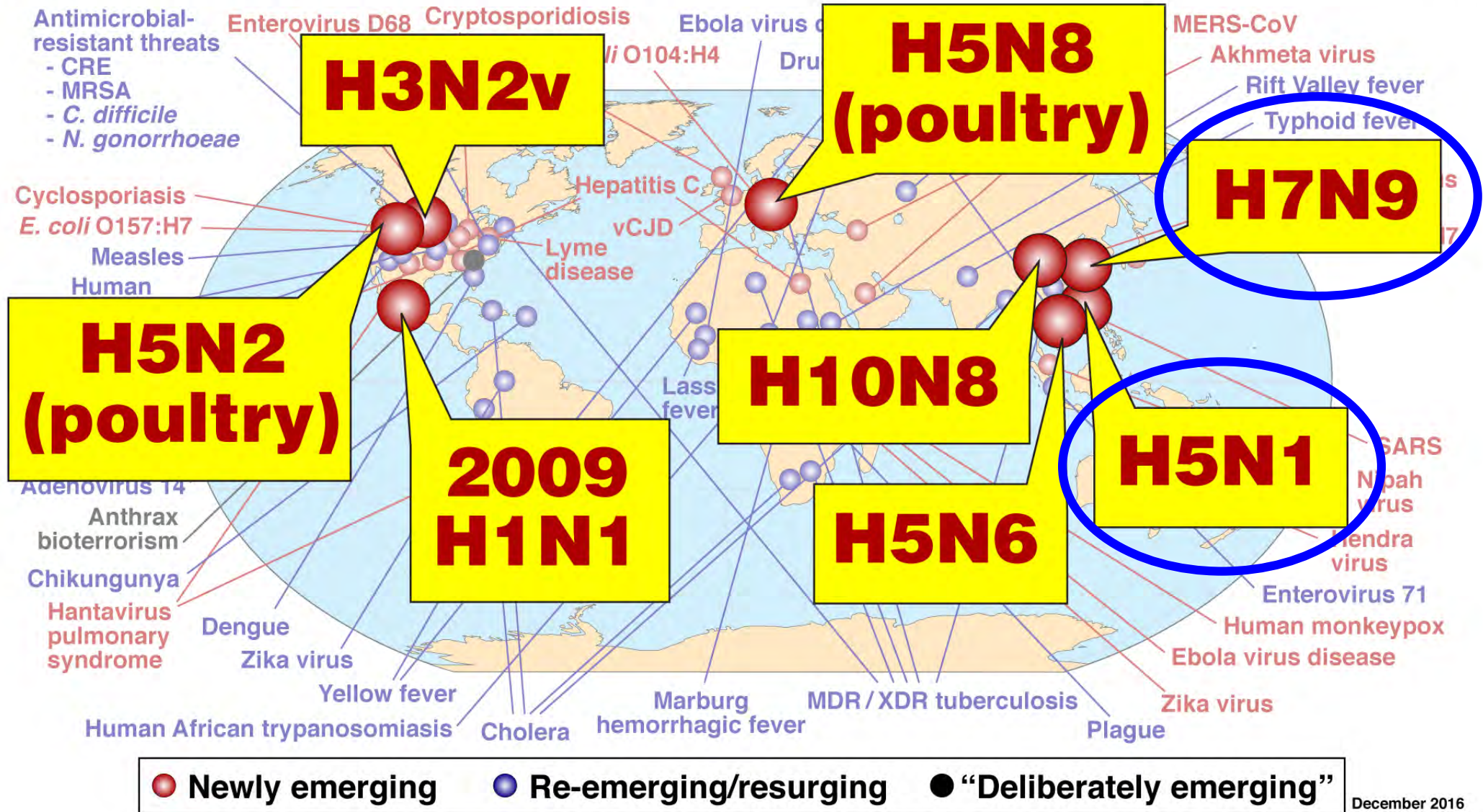


A circular diagram with two text blocks. The left block is 'Seasonal Influenza Preparedness' and the right block is 'Pandemic Influenza Preparedness'. Two thick red curved arrows connect them in a clockwise cycle: one from the top of the left block to the top of the right block, and another from the bottom of the right block to the bottom of the left block.

**Seasonal
Influenza
Preparedness**

**Pandemic
Influenza
Preparedness**

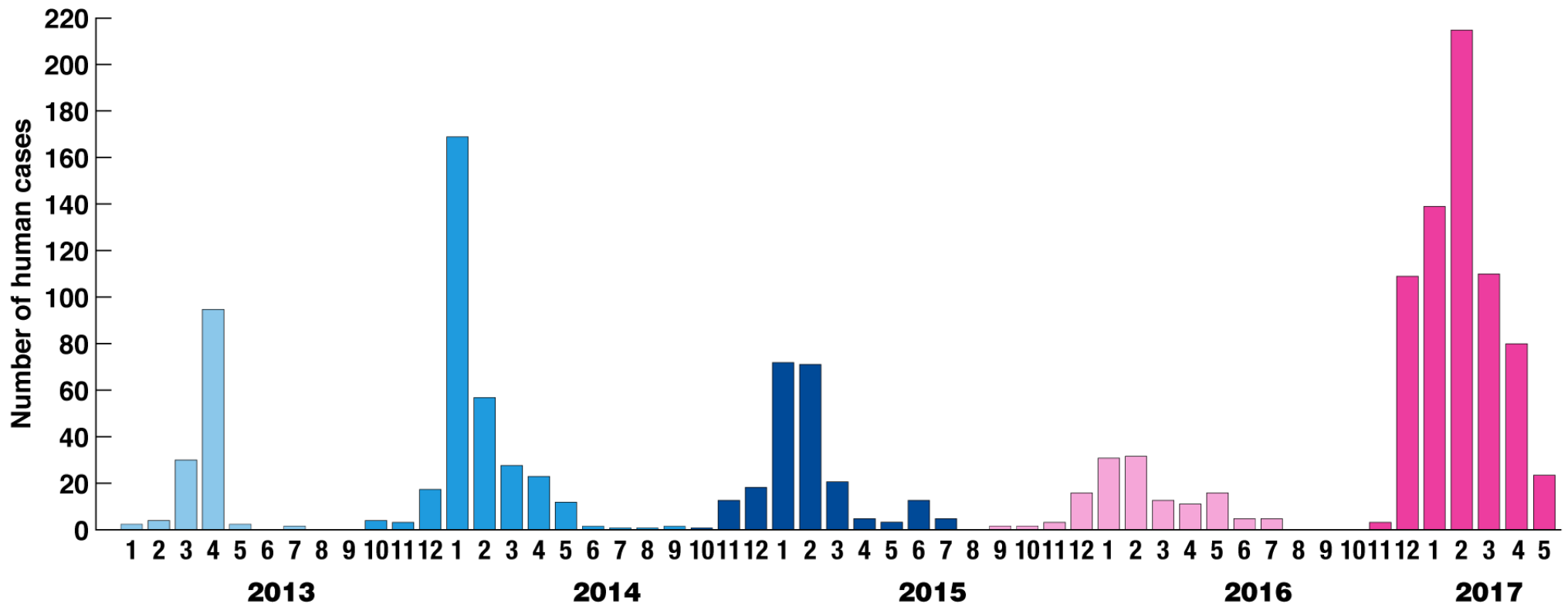
Examples of Recently Emergent Influenza Viruses



Five Waves of Human H7N9 Influenza Infections in China, February 2013-present

■ **1,486 confirmed human cases, 559 deaths**

■ **5th wave: >40% of cumulative cases**



Source: FAO, 5/10/2017

NIAID H7N9 Influenza Proposed Vaccine Trials

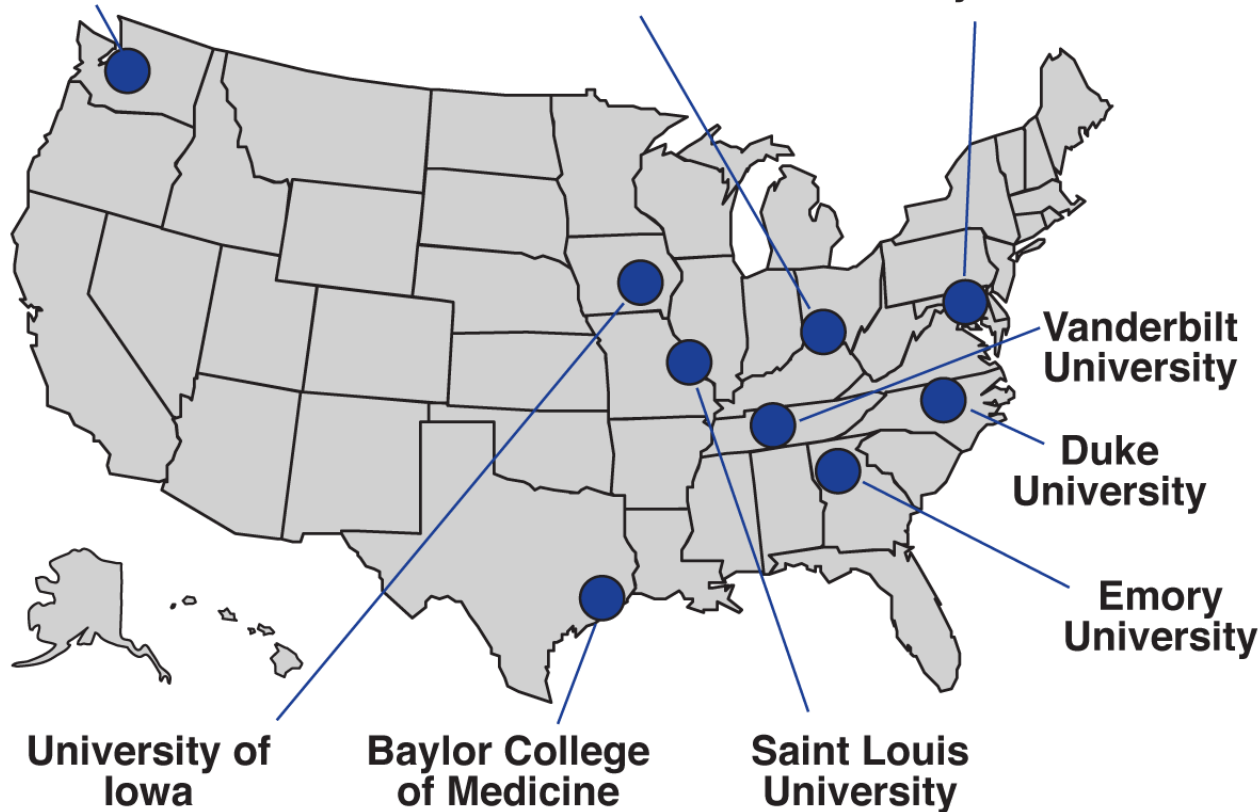
- **Phase 2 trials (several hundred volunteers) evaluating safety and immune response**
 - **Healthy Adults**
 - **Elderly**
 - **Children**
 - **Pregnant Women**
 - **Mix and Match (Vaccine from Company A + Adjuvant from Company B)**
 - **Concomitant with Seasonal (Adults)**
 - **Concomitant with Seasonal (Children)**
- **Trials would be conducted via the NIAID Vaccine and Treatment Evaluation Units (VTEUs)**

NIAID Vaccine and Treatment Evaluation Units (VTEUs)

Kaiser Permanente
Washington Health
Research Institute

Children's Hospital
Medical Center

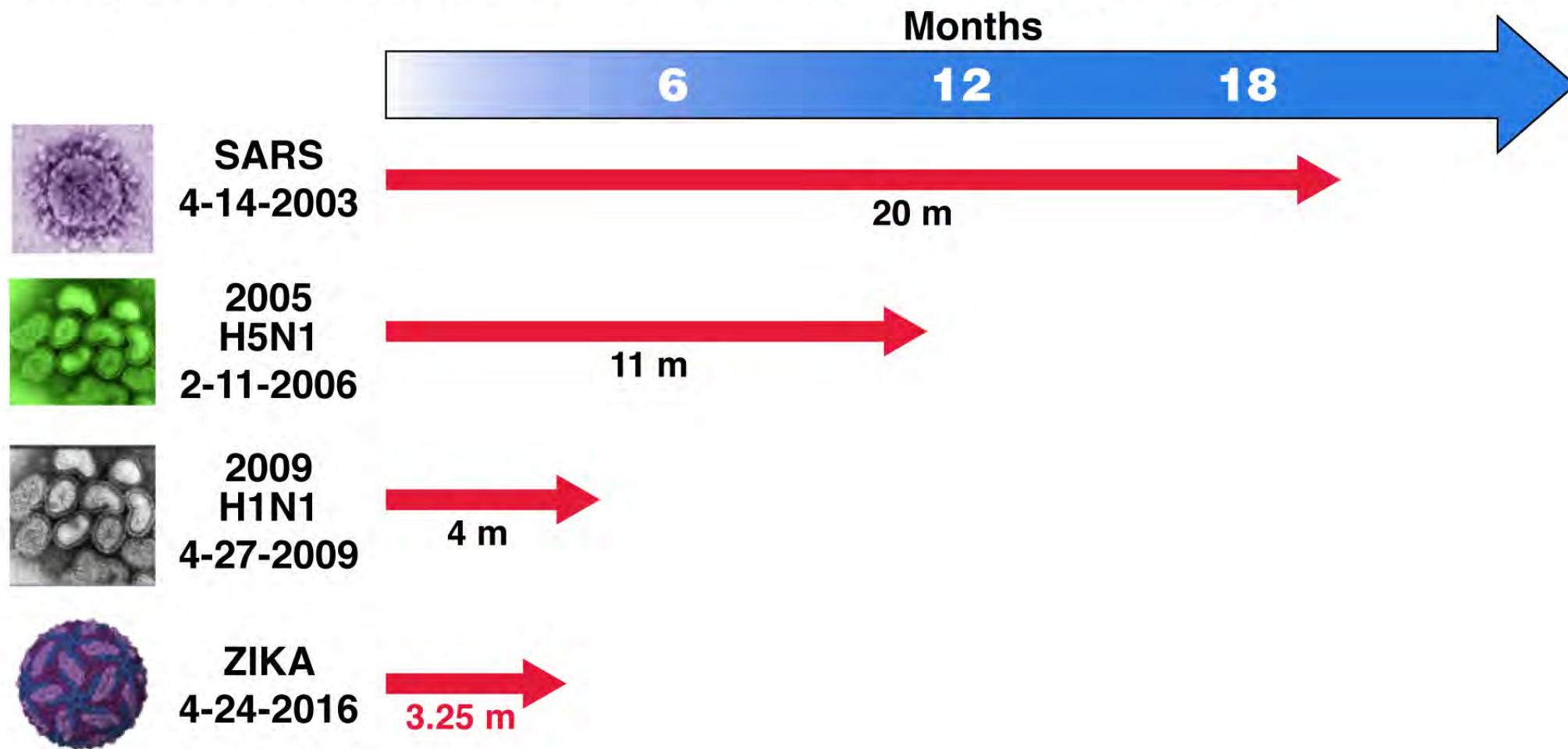
University of
Maryland



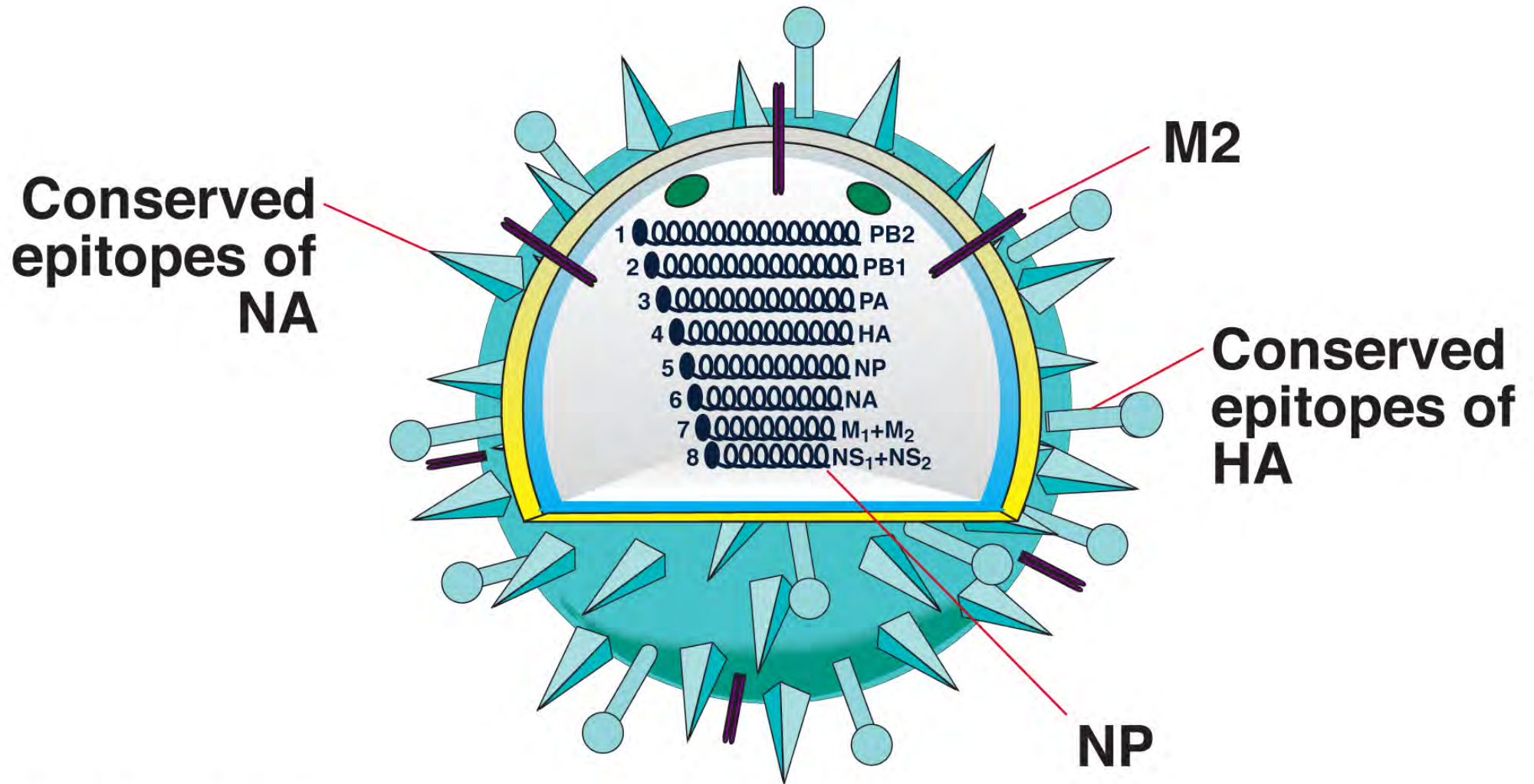
- Established in 1962
- Clinical trials to evaluate vaccines, diagnostics and therapeutics
- Epidemiologic studies
- Access to healthy and sick populations
 - Pediatric
 - Adult
 - Elderly
- Domestic and international capabilities

VRC DNA Vaccines for Emerging Infections

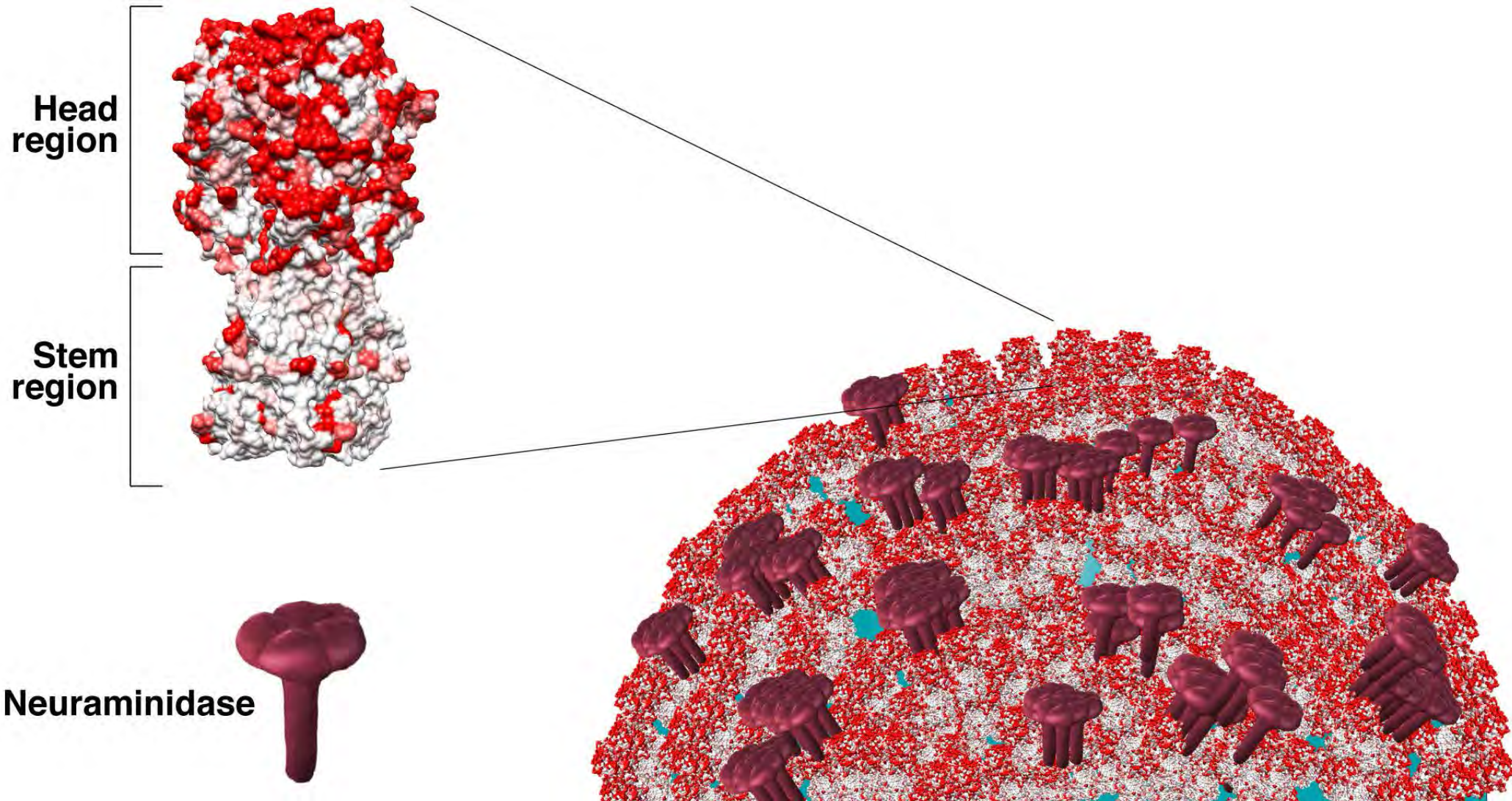
Sequence Selection to 1st Human Injection



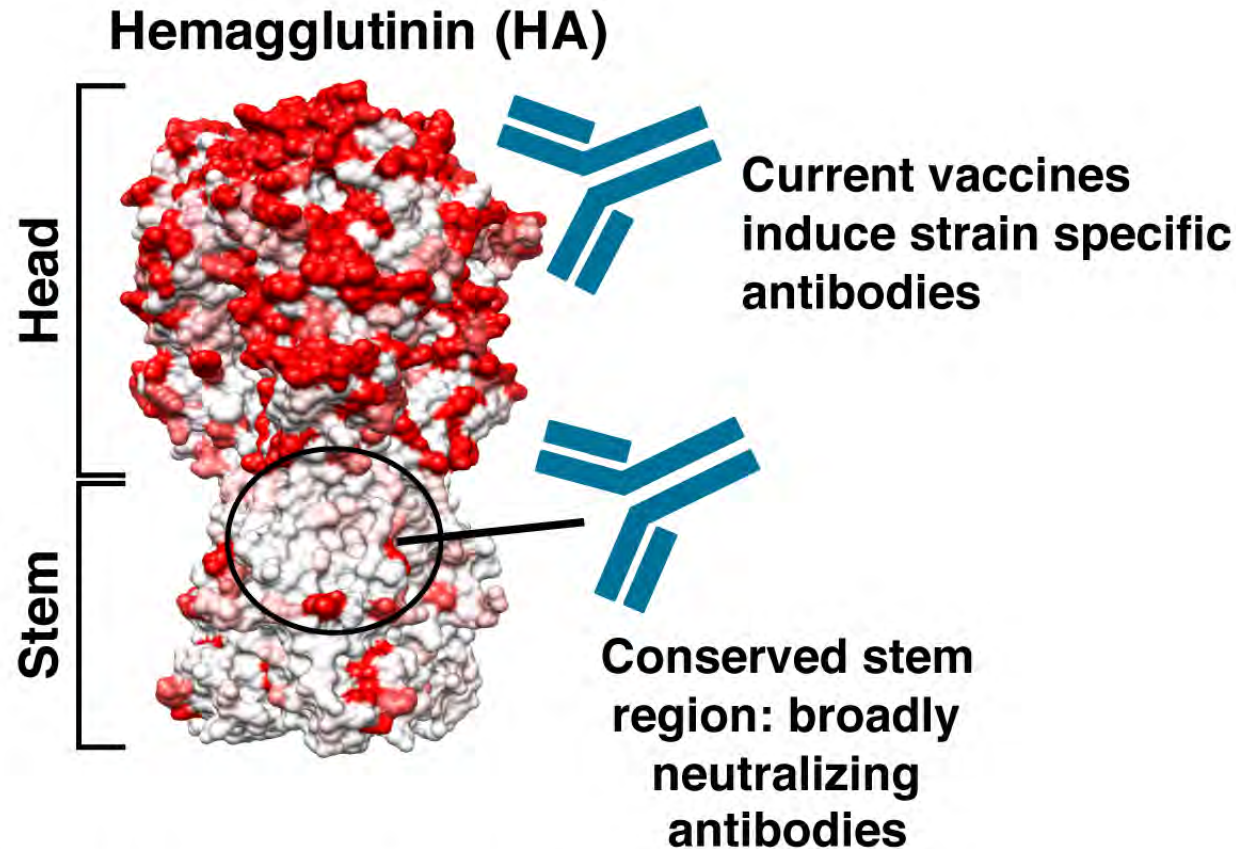
Selected Targets for “Universal” Influenza Vaccines



Influenza A Hemagglutinin (HA)



Generating Broadly Neutralizing Antibodies: Targeting the Stem



H1N1 Sequence conservation



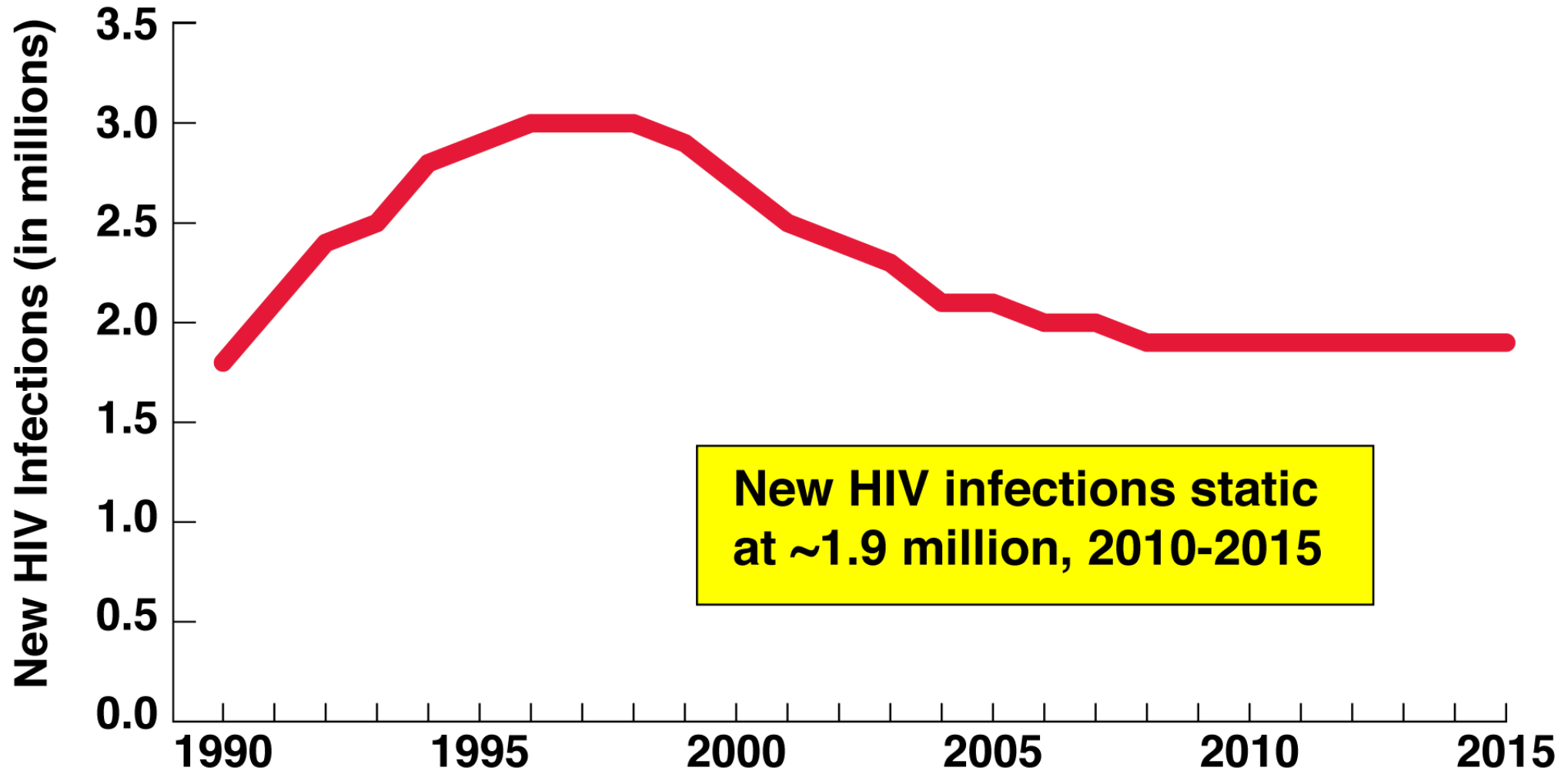
Courtesy Jeffrey Boyington

- Most antibodies bind to epitopes of highly variable head region
- Antibodies that neutralize multiple strains bind to a highly conserved area in the stem region

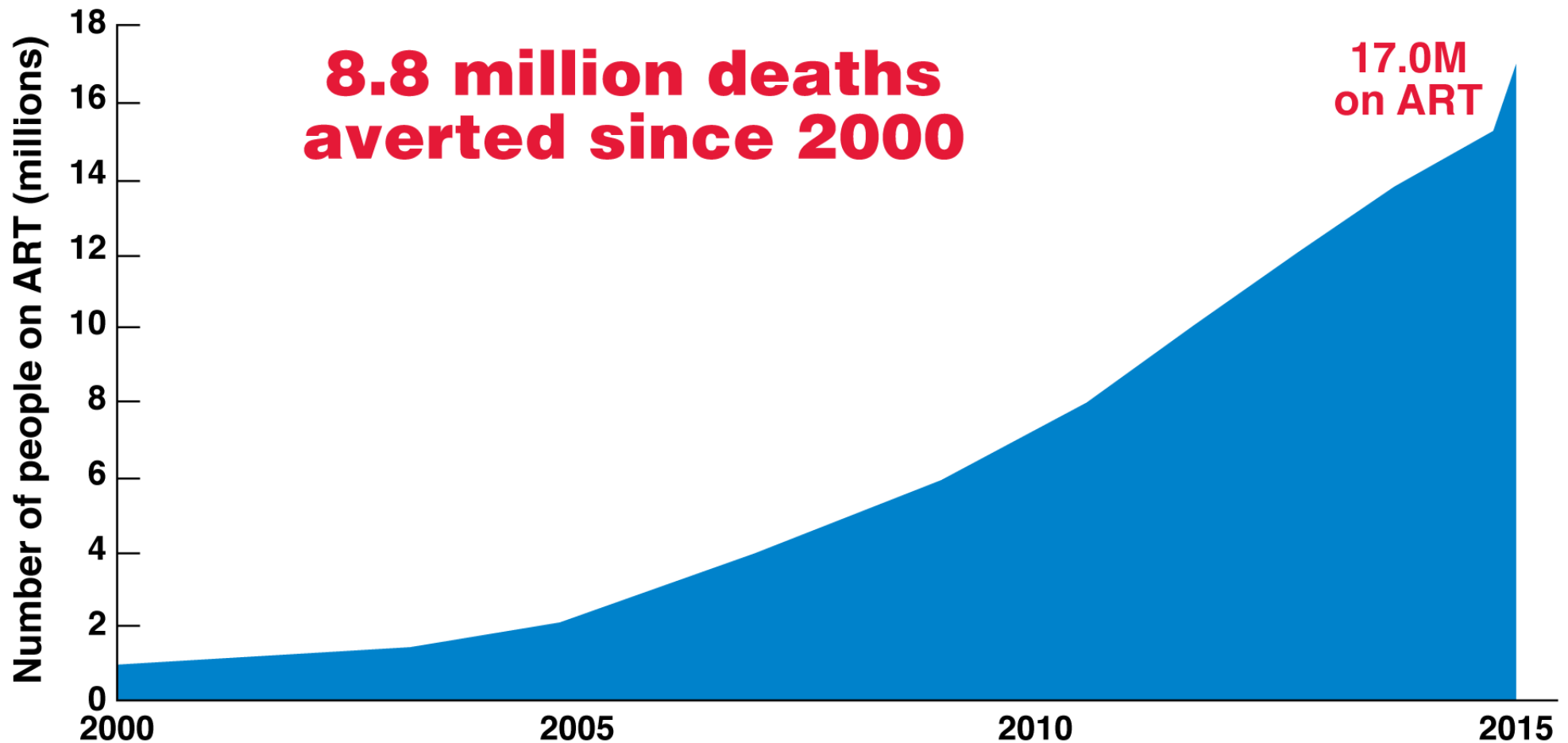
Examples of Established Infectious Diseases of Global Health Importance

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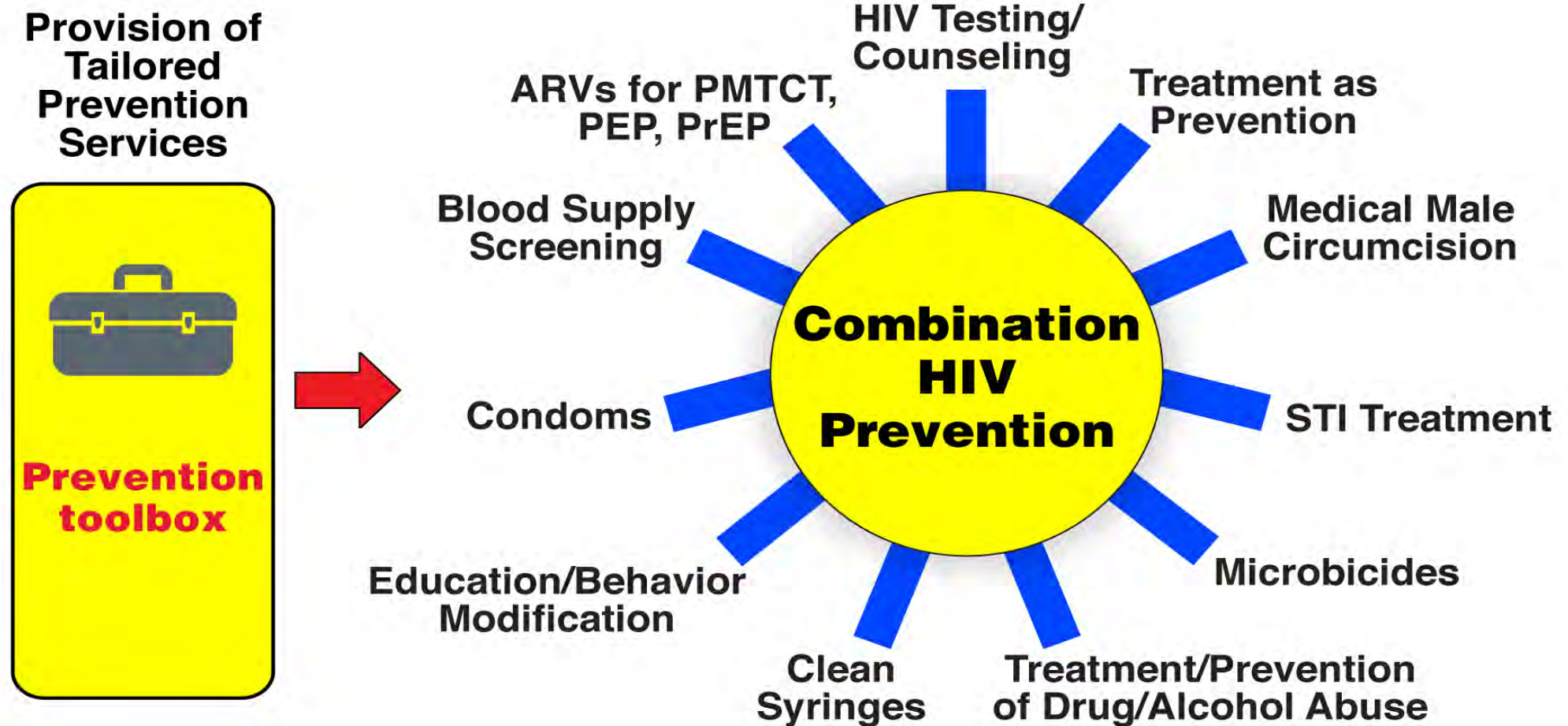
New HIV Infections Globally Among People Aged ≥ 15 Years, 1990-2015



Number of HIV-Infected People Globally Receiving Antiretroviral Therapy (ART), 2000-2015

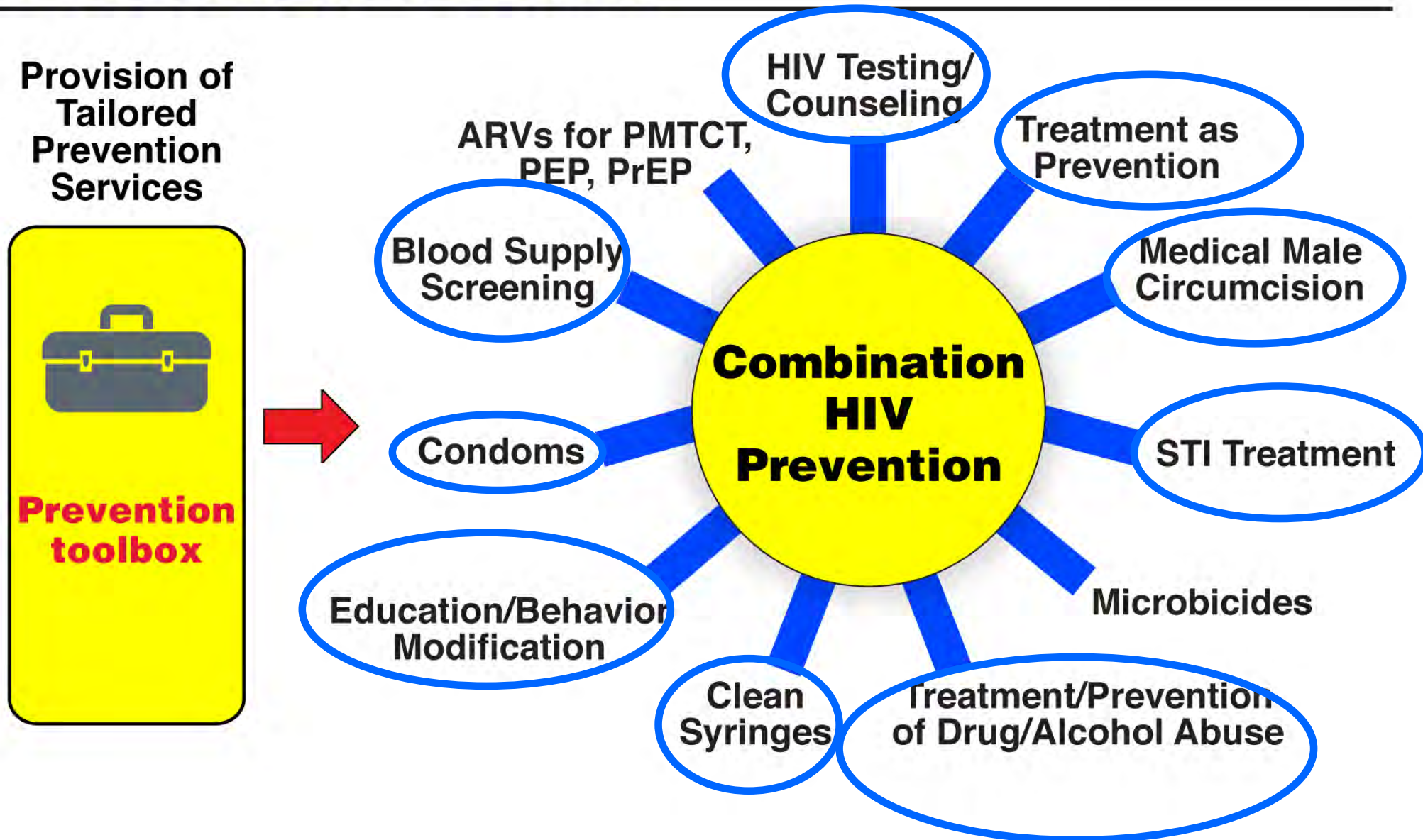


Tailored Prevention Using HIV Prevention Toolkit



Extra Credit: How many of these are standard public health approaches?

Tailored Prevention Using HIV Prevention Toolkit (Almost all Public Health!)



Prevention Modalities Built upon Antiretroviral Therapy

■ Treatment as Prevention

■ Pre-Exposure Prophylaxis (PrEP)

■ Post-Exposure Prophylaxis (PEP)

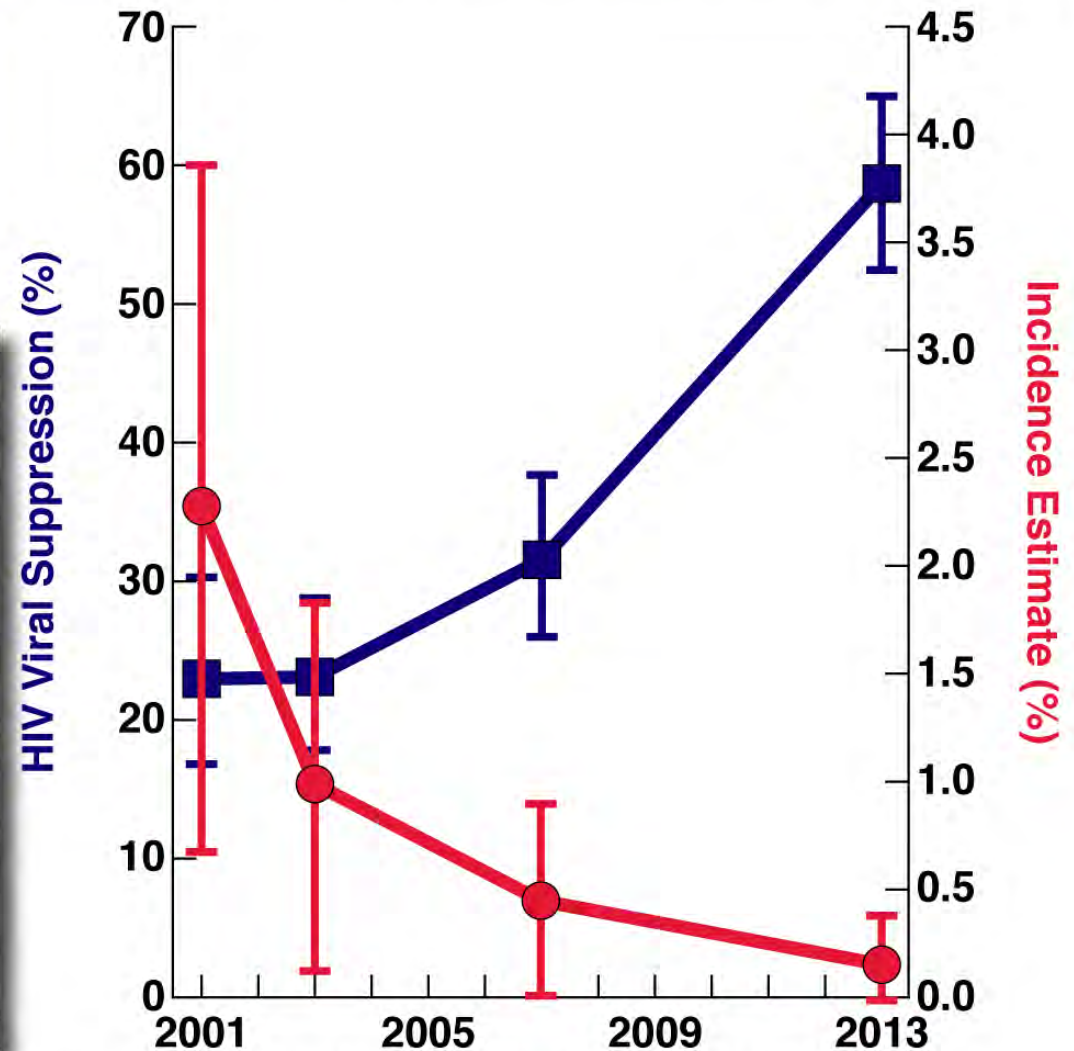
■ Prevention of Mother-to-Child Transmission

Treatment as Prevention in Baltimore



Improvements in the Continuum of HIV Care in an Inner-City Emergency Department

GD Kelen, TC Quinn et al.



■ As viral suppression increased from 23% to 59%, HIV incidence decreased from 2.3% to 0.16%

Prevention Modalities Built upon Antiretroviral Therapy

■ **Treatment as Prevention**

■ **Pre-Exposure Prophylaxis (PrEP)**

■ **Post-Exposure Prophylaxis (PEP)**

■ **Prevention of Mother-to-Child Transmission**

HIV Pre-Exposure Prophylaxis (PrEP)

- **HIV PrEP is the use of an antiretroviral medication to prevent the acquisition of HIV infection by at-risk uninfected persons**
- **Oral Truvada® (emtricitabine and tenofovir disoproxil fumarate) is licensed for HIV PrEP in the USA**





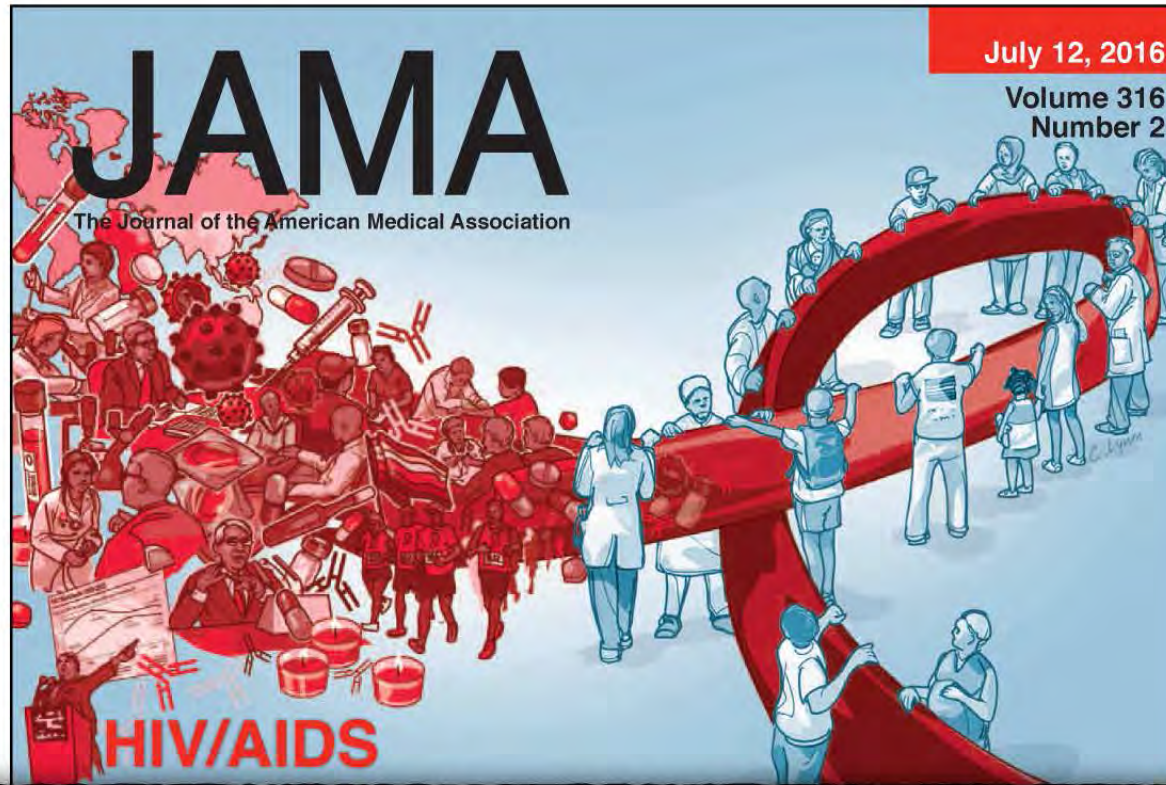
National Institutes of Health
Turning Discovery Into Health

FOR IMMEDIATE RELEASE
Tuesday, December 20, 2016

News Release

NIH Launches First Large Trial of a Long-Acting Injectable Drug for HIV Prevention

- **HPTN 083 will assess efficacy/safety of injected cabotegravir once every 8 weeks compared to daily oral PrEP with Truvada**
- **N= 4,500 MSM and TSM; 45 sites in eight countries in the Americas, Asia and Africa**



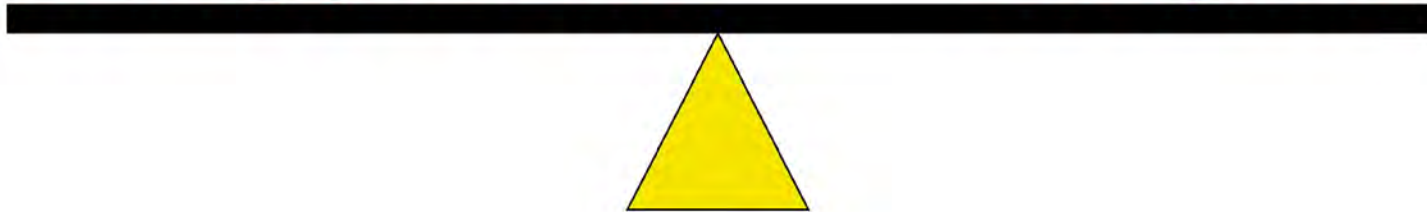
An HIV Vaccine -- Mapping Uncharted Territory

AS Fauci

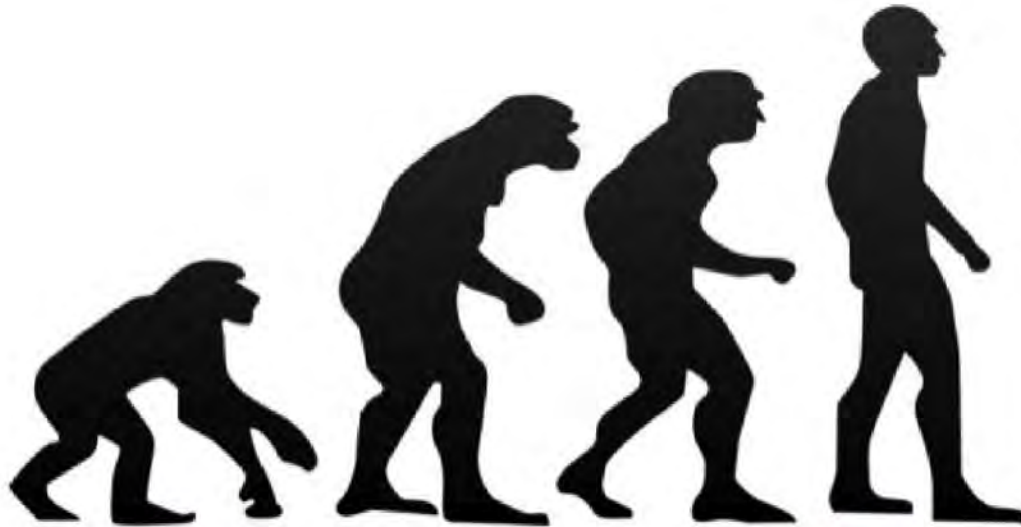
Emerging and Re-emerging Infectious Diseases – A Delicate Balance

**The Extraordinary
Capability of
Microbial Pathogens
to Change, Adapt,
Emerge,
Re-Emerge, and Persist**

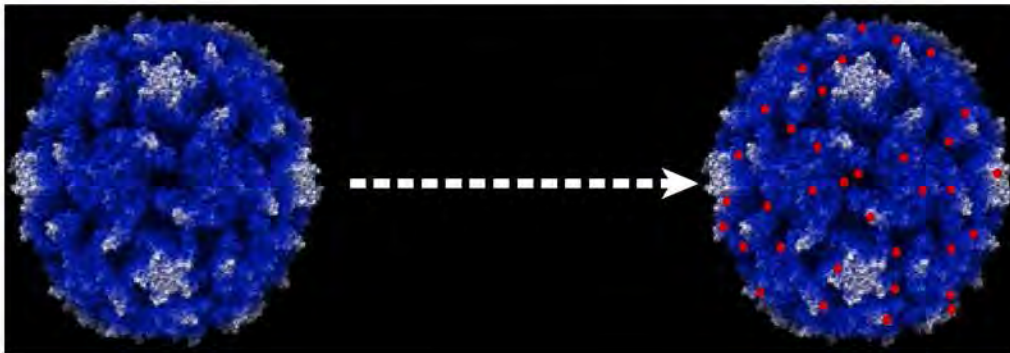
**Public Health
Measures,
Biomedical
Research, and
Countermeasure
Development**



Microorganisms versus Man



Homo sapiens
~8 million years
2% genome change



Human virus
<one day
2% genome change

“The future of humanity and microbes likely will unfold as episodes of a suspense thriller that could be titled *Our Wits Versus Their Genes.*”



--Joshua Lederberg, *Science*, April 14, 2000

THANK YOU



David M. Morens, MD, NIAID, NIH